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ABSTRACT

This packet contains a student manual and instructor key for a course in housekeeping for health care facilities in secondary health occupations programs. The student manual is divided into six units: (1) introduction to housekeeping; (2) interpersonal relations; (3) infection control and safety; (4) general cleaning procedures; (5) cleaning areas within a facility; and (6) laundry. Every unit contains several lessons, each consisting of the following components: objectives, key terms, information sheets, and activity sheets. Written evaluation forms (tests) and skill evaluation forms are included for every unit. The student manual, which can be used for individual study or in a classroom setting, also contains 12 references and a glossary defining 72 terms. The instructor key contains instructional strategies, a competency crosswalk, and answers to written evaluations. (KC)

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HOUSEKEEPER IN HEALTH CARE FACILITIES

STUDENT GUIDE

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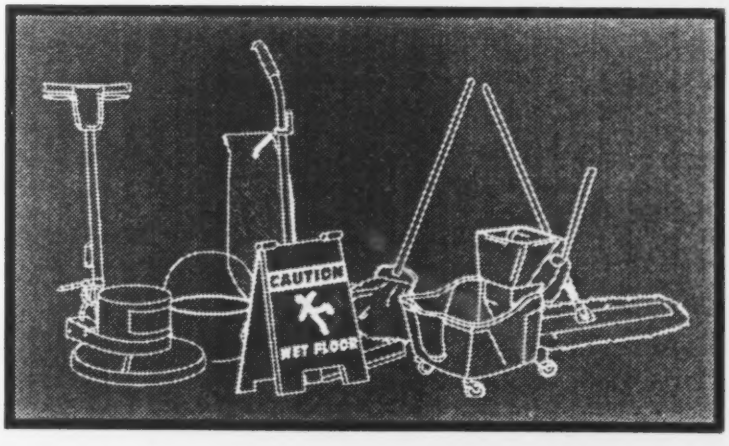

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Housekeeper in Health Care Facilities

Student Manual

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Table of Contents

Acknowledgments iii

Foreword viii

Bibliography ix

Glossary xi

Unit I - Introduction to Housekeeping 1.1

Lesson 1: The Role of the Housekeeper 1.3
Activity Sheet: The Role of the Housekeeper 1.11
Lesson 2: Employment in a Health Care Setting 1.15
Activity Sheet: Employment in a Health Care Setting 1.19
Lesson 3: Developing Professionalism 1.21
Activity Sheet: Developing Professionalism 1.27
Unit Checklist 1.31

Unit II - Interpersonal Relations 2.1

Lesson 1: Respecting Clients 2.3
Activity Sheet: Respecting Clients 2.7
Lesson 2: Customer Service 2.9
Activity Sheet: Customer Service 2.11
Lesson 3: Communicating with Others 2.13
Activity Sheet: Communicating with Others 2.19
Unit Checklist 2.23

Unit III - Infection Control and Safety 3.1

Lesson 1: Safe Work Environment 3.3
Activity Sheet: Safe Work Environment 3.11
Lesson 2: Working with Cleaning Chemicals 3.15
Activity Sheet: Working with Cleaning Chemicals 3.19
Lesson 3: Infection Control 3.21
Activity Sheet: Infection Control 3.27
Lesson 4: Preventing and Responding to Emergencies 3.31
Activity Sheet: Preventing and Responding to Emergencies 3.33
Unit Checklist 3.35

Unit IV - General Cleaning Procedures 4.1

Lesson 1: Housekeeping Equipment 4.3
Activity Sheet: Housekeeping Equipment 4.7

Lesson 2: Routine Cleaning Tasks 4.9
Activity Sheet: Routine Cleaning Tasks 4.19
Lesson 3: Floor Cleaning 4.21
Activity Sheet: Floor Cleaning 4.29
Unit Checklist 4.31

Unit V - Cleaning Areas within a Facility 5.1

Lesson 1: Cleaning Client Rooms 5.3
Activity Sheet: Cleaning Client Rooms 5.9
Lesson 2: Cleaning Areas of the Facility other than Client Rooms 5.11
Activity Sheet: Cleaning Areas of the Facility other than Client Rooms 5.17
Unit Checklist 5.19

Unit VI - Laundry 6.1

Lesson 1: Safety 6.3
Activity Sheet: Safety 6.7
Lesson 2: Laundry Procedures 6.9
Activity Sheet: Laundry Procedures 6.15
Lesson 3: Distributing Laundry Items and Cleanup 6.19
Activity Sheet: Distributing Laundry Items and Cleanup 6.21
Unit Checklist 6.23

WRITTEN UNIT EVALUATIONS AND SKILL SHEETS
(included at the end of the manual)

Unit I - Introduction to Housekeeping ..... *Introduction to Housekeeping Test*

Written Unit Evaluation 1

Unit II - Interpersonal Relations ..... *Interpersonal Relations Test*

Written Unit Evaluation 1

Unit III - Infection Control and Safety ..... *Infection Control and Safety Test*

Written Unit Evaluation 1

Unit IV - General Cleaning Procedures ..... *General Cleaning Procedures Test*

Written Unit Evaluation 1
Skill Sheet: Empty Trash 5
Skill Sheet: Damp Dust Surfaces 7
Skill Sheet: Clean Glass Surfaces and Mirrors 9
Skill Sheet: Clean Sink 11
Skill Sheet: Clean Toilet 13

Skill Sheet: Complete Detailed Wall Cleaning 15
Skill Sheet: Clean Ceilings, Overhead Lights, and Vents 17
Skill Sheet: Clean Shower 19
Skill Sheet: Clean Bathtub 21
Skill Sheet: Clean Client Bed 23
Skill Sheet: Dust Mop Floor 25
Skill Sheet: Damp Mop Floor 27
Skill Sheet: Clean Blinds 29
Skill Sheet: Vacuum Carpeted Floors 31
Skill Sheet: Clean Overbed Table and Bedside Table 33
Skill Sheet: Clean Furniture 35
Skill Sheet: Top Scrub and Recoat Floor 37
Skill Sheet: Strip and Recoat Floor 39
Skill Sheet: Spray Buff Floor 41
Skill Sheet: Clean Carpet by Using Wet Extraction 43
Skill Sheet: Clean Carpet by Using Bonnet Cleaning Method 45
Skill Sheet: Clean Carpet by Using the Dry Extraction Method 47
Skill Sheet: Clean Spot from Carpet 49
Skill Sheet: Clean Blood/Body Substances from a Carpeted Surface 51
Skill Sheet: Clean Blood/Body Substances from a Hard Floor Surface 53

Unit V - Cleaning Areas within a Facility ..... *Cleaning Areas within a Facility Test*

Written Unit Evaluation 1
Skill Sheet: Complete Daily Cleaning of Client Rooms 3
Skill Sheet: Make an Unoccupied Bed 5
Skill Sheet: Clean Client Rooms upon Discharge 9
Skill Sheet: Complete Deep Cleaning of Client Rooms 11
Skill Sheet: Clean Public Restrooms 13
Skill Sheet: Clean Soiled or Clean Utility Room 15
Skill Sheet: Clean Report Room, Break Room, and Nurses Station 17
Skill Sheet: Clean Lobby 19
Skill Sheet: Clean Dining Room 21
Skill Sheet: Clean Office or Conference Rooms 23
Skill Sheet: Clean Shower or Tub Room 25
Skill Sheet: Clean Elevator 27
Skill Sheet: Clean Drinking Water Fountain 29

Unit VI - Laundry ..... *Laundry Test*

Written Unit Evaluation 1
Skill Sheet: Collect Personal Clothing for Laundering 5
Skill Sheet: Collect Soiled Linens from Nursing Units 7
Skill Sheet: Sort Laundry 9
Skill Sheet: Remove Stains from Laundry Items 11
Skill Sheet: Wash Laundry 13
Skill Sheet: Dry Laundry 15
Skill Sheet: Launder Items from an Isolation Room 17

Housekeeper in Health Care Facilities Competency Record

Housekeeper in Health Care Facilities Certificate of Achievement

Acknowledgments

The content of the *Housekeeper in Health Care Facilities* manual was developed with input from secondary health occupations education instructors, housekeeping supervisors from long-term care and acute care, and personnel from the Missouri Department of Elementary and Secondary Education and the Instructional Materials Laboratory at the University of Missouri-Columbia. A sincere thank you is extended to the advisory committee members.

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Foreword

This *Housekeeper in Health Care Facilities* manual is designed to be used by students who are in secondary health occupations programs. A clinical site is needed for individuals to practice housekeeping skills and to demonstrate mastery of these skills.

This manual is divided into six units: Introduction to Housekeeping, Interpersonal Relations, Infection Control and Safety, General Cleaning Procedures, Cleaning Areas within a Facility, and Laundry. Units are further divided into lessons, which contain lesson objectives, key terms, content information, illustrations, and activity sheets as appropriate for the content. Activity Sheets are designed to assist the learner in mastering the information in each lesson. The Clinical/Laboratory Activities included on the Activity Sheets should be reviewed or discussed with the instructor or clinical supervisor upon completion.

Each unit has a written evaluation that should be taken after all lessons in the unit are studied. A score of a least 80 percent indicates that the student has satisfactorily completed the unit and may proceed to the next unit. Students should review any lessons or materials that correspond to missed evaluation items. The student should practice the skills outlined in the lessons before requesting evaluation of the skills. Not all lessons contain steps of procedure. The clinical supervisor will be evaluating mastering of the skills.

A Unit Checklist, located at the end of each unit, provides a method for keeping track of Activity Sheets, Skill Sheets, and the Written Unit Evaluation to be completed in the unit.

The Written Unit Evaluations and Skill Sheets are included at the end of the manual. If you are taking this instruction under the supervision of an instructor or clinical supervisor, these pages may be removed from your manual. When you are ready to complete a Written Unit Evaluation or a Skill Sheet, check with your instructor or clinical supervisor.

Those using this manual on an individual basis may want to order the Instructor's Key, which provides answers to Activity Sheets and Written Unit Evaluations.

Prior to beginning this manual, the student should successfully master all competencies in the *Health Care Assistant Core* curriculum. The *Health Care Assistant Core* curriculum is designed to teach information and skills common to all health care workers.

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Glossary

A

Accreditation - the process by which the facility is evaluated by a survey team from JCAHO and meets certain minimum performance standards to assure the public of safe health care delivery

Advance directive - a legal document that tells the family and health professionals the wishes of the client if they are unable to speak for themselves

Airborne precautions - used when the infectious agent is carried in the air and can be inhaled

B

Bleach - a hypochloride solution that helps remove stains from white clothing and linens

Bloodborne Pathogen Standard - issued by OSHA in 1991 to protect workers at risk to diseases that are spread through the blood and select body fluids

Body mechanics - using the normal strengths of the body to prevent injury when moving or lifting objects

Body Substance Isolation - a method of infection control that focuses on isolation of all moist and potentially infectious body substances from all patients regardless of their infection status

Broad spectrum - a chemical that will kill most types of microorganisms

C

Category System of Isolation Precautions - used only after a patient had been diagnosed with an infectious disease; first published guideline, had seven isolation categories

Center for Disease Control and Prevention (CDC) - an agency of the Department of Health and Human Services that conducts research, tracks statistics, and makes recommendations for controlling diseases

Chain of command - the organizational structure within a health care facility

Client confidentiality - to keep client information private

Common areas - rooms used by many people for a similar purpose

Competence - the ability to perform the duties associated with a specific job

Concentrated cleaner - a very strong chemical that must be diluted to work properly and safely

Contact precautions - used when a client is diagnosed with or is suspected of having an infectious disease that is spread by contact with dry skin or contaminated surfaces

Continuing Education Units (CEUs) - based on the number of contact hours of education involved

Cross-training - teaching an employee skills used in several departments

D

Delegate - assign or distribute work to the employees most suited to complete the job effectively

Dependable - someone who can be counted on to do what is expected of them

Discharge - when a client will not return to a room due to returning home, being transferred to another level of care or the client dies

Disinfectant - a chemical that will kill most microorganisms but does not sterilize the surfaces

Division of Aging - part of the Department of Social Services responsible for licensing long-term care facilities in the state

Droplet precautions - used when the infectious agent is transmitted in droplets (through sneezing or coughing) to the mucous membranes of another person

E

E-mail - electronic mail; the message is typed on a computer and sent electronically to a receiver's computer where it is available to be read almost immediately

Emulsifier - used before soap and bleach to make a stain easier to wash out

Environmental Protection Agency (EPA) - federal agency that sets regulations and provides information about the disposal of hazardous material

Ethical - conforming to accepted professional standards of conduct

Exposure control plan - details steps to be followed if an employee has been contaminated by blood

External customers - those people outside an organization who choose the product or service a business offers

F

Fabric softener - chemical used to make clothes feel soft rather than stiff and coarse after being washed

Fade - the release of color from the fabric into the water where it is then picked up by a lighter colored piece of laundry

G

Germicide - an agent used to kill microorganisms

H

Hazard Communication Standard - issued by OSHA to be sure all workers are informed of the risks of their work environment

Health care team - group of many different types of employees who work in a variety of health care facilities

I

Industrial strength - chemicals more concentrated than those used in most homes

Infectious disease - the result of microorganisms that spread to other people

Internal customers - those people who work within an organization who rely on the services of a housekeeper in order to complete their job; staff who work within the facility and are members of the health care team

Inseam - the inside seam of each pant leg that goes from the bottom of the leg to the center of the pant

Isolation - special precautions used to prevent the spread of a particular microorganism

J

Job description - lists the skills an employee is expected to perform on the job

Joint Commission on the Accreditation of Health care Organizations (JCAHO) - an independent, not-for-profit organization that accredits heath care organizations

L

Laundry detergent - chemical used to clean dirt from clothes

Lifelong learning - learning that continues throughout one's life

Lint - small particles of fabric that have come lose during the washing and drying process

M

Material Safety Data Sheets (MSDS) - contain information about chemicals in the workplace, their hazards, first aid procedures, and spill cleanup

Multi-skilled worker - an employee who has learned the skills needed to work in several departments of a health care facility

N

Neutralizer rinse - a chemical that returns the normal pH (acid or base) to the clothes

Nonverbal message - communication without words such as gestures, facial expression, or body language

O

Occupational Safety and Health Administration (OSHA) - federal agency that sets health and safety standards to protect employees

P

Personal Protective Equipment - gloves, mask, protective eyewear, and gowns used to act as barriers from contact with or spread of infectious microorganisms

Policy manual - describes how a health care facility will handle issues within the facility; the formal rules of the facility

Procedure manual - explains the steps an employee should use to complete a specific procedure

Professional work habits - behaviors exhibited by an employee that allow those around him or her to think of him or her as a professional

Professional - one who has competence in a particular field or occupation

Q

Quality client care - when all team members work together and the client gets the best care possible

R

Respect - to honor or hold in high esteem

S

Secondary container - contains the chemical in the proper dilution

Sharps box - a puncture-resistant container used to place contaminated needles, scalpel blades and other disposable sharp instruments

Sort - separating clothes into groups that are similar colors and similar types of fabric

Stain - substance that has caused a color change in fabric of clothing or linens

Standard Precautions - a method of infection control that focuses on taking precautions with all body substances of all clients regardless of their infection status

Static - chemical attraction of a piece of clothing to another or to the person wearing it

T

Team - a group of people working together toward a common goal

Test area - a location that is hidden to determine how the fabric will respond to the cleaning agent

Topping off - adding additional concentrate to a secondary container when it is not quite empty .

Transmission-based precautions - designed for clients who are known to be infected or are suspected of having a highly infectious disease; additional precautions to the Standard Precautions

U

Universal Precautions - a method of infection control that focuses on taking precautions with all blood and body fluids potentially infected with bloodborne pathogens regardless of client diagnosis

V

Verbal message - the spoken or written word

Virulent - extremely hard to kill

W

Wet/dry vacuum - used to vacuum dirt or water

Wringer - a mop bucket attachment used to press out excess water from the mop

Unit I

Introduction to Housekeeping

The health care delivery system is a large employer in the United States. It is made up of many people who perform different jobs to provide quality health care. The housekeeping staff is an important group of workers that are a part of the health care team.

The first lesson reviews the job duties of the housekeeper and the reporting procedure for questions or concerns. It also covers the job description and what it means to an employee. The departments within a health care facility and job opportunities available within the departments will be explored.

The health care industry includes many agencies that regulate health care facilities. Lesson two explores some of these agencies and their role in assuring quality client care. This lesson will also discuss how to become employed as a housekeeper and requirements of employment. The policy and procedure manual explains how a facility expects a particular job to be completed. This unit will review the importance of the policy and procedure manual and how it can help housekeepers in doing their job.

The housekeeper will meet the public every day. Making a positive first impression is very important. The third lesson reviews proper dress for the job, the importance of daily hygiene, and how to work as a member of the health care team. This unit will also discuss professional organizations and the importance of keeping current with changes in housekeeping procedures.

Unit Lessons

The Role of the Housekeeper

Employment in a Health Care Setting

Developing Professionalism

Lesson 1:
The Role of the Housekeeper

Objectives:

A. Describe the importance of housekeeping to the overall quality of health care.

B. Name the general duties of a housekeeper.

C. Explain the purpose of the job description.

D. Practice within the job description of your employer.

E. Identify places of employment as a housekeeper in a health care setting.

F. List the departments to which a housekeeper may be assigned.

G. Follow the chain of command.

H. Match terms to their definitions.

Key Terms:

- Health care team
- Quality client care
- Cross-training
- Multi-skilled worker
- Job description
- Chain of command

The health care team has many different types of employees who work in a variety of health care facilities. This group of workers is called the **health care team**. Examples of people on the health care team include physicians, nurses, transporters, and housekeepers. The goal of all the members of this team is to help clients get well as quickly as possible. When all team members work together and the client gets the best care possible, it is called **quality client care**. The housekeeping staff is a very important part of this health care team. This lesson will cover the job duties of a housekeeper, where a housekeeper might be employed, where to get a job, and who is a member of the housekeeping team.

Importance of the Housekeeper to the Health Care Team

The health care industry is the largest employer in the United States. The health care team is made up of workers such as nurses, doctors, physical therapists, housekeepers, and medical transcriptionists. There are more than 200 job titles in health care today. The housekeeping staff is an important part of the health care team. The housekeeper may be the first staff member to greet a client in the morning. The housekeeper may spend more time in the client's room than any other single staff member. Often the housekeeper knows the client as well as the nursing and medical staff. A client or visitor forms a first impression of a health care facility upon entering the front door. A clean, odor-free, neat, pleasant looking environment will help the health care facility make a positive first impression on the client or visitor.

Housekeeper Duties

The specific job duties of a housekeeper will vary depending on the health care facility in which he or she works. The overall mission of the housekeeping department can be described in two statements:

- To provide a clean, odor-free, pleasant appearing environment for clients, visitors, and staff and
- To reduce the number and spread of microorganisms by using strict aseptic cleaning techniques.

There are, however, some common job duties that a housekeeper would be expected to perform in most facilities. Some common job duties include: vacuum carpets, dust and damp mop floors, clean restrooms, dust furniture, empty trash, restock supplies, and clean up spills. Some tasks may be done on a weekly or monthly basis, such as stripping and resurfacing floors, washing walls in client rooms, cleaning mini-blinds, or taking down draperies for laundering. This curriculum is designed to teach the common skills most housekeepers will need to know.

Health care facilities often cross-train employees. **Cross-training** means teaching an employee skills used in several departments. For example, a housekeeper might learn the job duties needed to work on any of the general client units such as the medical unit or the surgical unit. Once skilled in this work, he or she would be cross-trained to clean in the operating room, the intensive care unit, or the radiology department. Another example would be a housekeeper in a long-term care facility who would learn the duties of a housekeeper in that facility and then learn the duties to work in the laundry. Once an employee has learned skills to work in more than one area, he or she is considered a **multi-skilled worker**. A worker who is able to work in several departments of a health care facility is a very valuable employee. The multi-skilled worker is flexible and can fill in where the need is greatest on any scheduled work day. This helps the industry control the cost of health care.

The Job Description

The health care facility will have a job description for each of the health team members. A **job description** tells the employee the skills he or she is expected to perform in that job. The employee should already have these skills or will be taught the skills as a part of the orientation to the job. Each facility's job description will be a little different because it has been written specifically for that facility. Reading the job description as a part of the employment process will help the applicant know whether he or she is qualified for the job.

When working on an assigned unit, the employee is expected to perform the job duties listed in the job description. It is not appropriate to complete jobs that the employee has not been trained to do or was not hired to do. For example, a housekeeper is cleaning in Mr. Gray's room and he asks the housekeeper to empty his urinal. It is not appropriate to do this since housekeeping staff are not hired or trained to work as a nurse assistant. The client might need to have his urine measured or strained or a specimen collected. The best way to handle this would be to state, "I am not allowed to empty your urinal, but I will let your nurse assistant know you need help." Another example would be if the physical therapist asked the housekeeper to assist in transferring a client. Housekeeping staff have not been trained in transfer skills and this would not be a part of their job description. Simply state, "I cannot help you transfer Ms. Jones, but I will find someone who can help." To maintain good relationships with the other staff members do not say, "That's not in my job description" or "I can't do that" since this type of communication could lead to bad feelings among health team members.

Job Description

Title: Housekeeper

Basic Responsibilities: Routine light housekeeping performed to meet standards of quality. Reviewed for thoroughness, neatness, and general effectiveness.

Job Duties: Perform various duties in the care and cleaning of health care facilities.

Clean and stock restrooms continually throughout the day: wet-mop floors; clean and disinfect sinks, stools, and commodes; clean and polish mirrors; wash walls; and restock restrooms with supplies as needed.

Wet-mop facility floors, prepare floors for waxing, apply wax, and buff floors. Vacuum carpet.

May be assigned work in areas requiring special use of disinfectants, cleaning techniques, and sanitation procedures such as in hospital isolation rooms, operating rooms, recovery rooms, and laboratories.

Clean client rooms including: empty trash receptacles, spot wash walls, dust furniture, clean windows, and clean blinds. Collect and distribute towels and linens. Make beds as directed.

Clean assigned rooms, halls, water fountains, entrances, stairways, and elevators. Utilize various cleaning solutions, polishes, and equipment as needed.

Conduct spot checks of all mechanical and utility equipment on an established schedule to be aware of and locate problems. Report problems to supervisor to arrange repair or maintenance.

Perform related duties as assigned.

Supervision Received: Under direct supervision, receives oral and written instructions daily on work to be performed. Frequency of contact with supervisor varies in accordance with work assignment.

Qualifications: Ability to read and write. Physical strength, coordination and stamina sufficient to perform assigned duties. Ability to perform housekeeping functions requiring cleanliness, thoroughness, responsibility, promptness, and dependability.

Employment Opportunities in Health Care

In the past when one thought of a health care facility, a hospital is what came to mind. Today health care is constantly changing. There are many opportunities for employment for the housekeeper in a health care setting. There are still many hospitals, but a housekeeper can also find employment in long-term care facilities, mental health facilities, outpatient clinics, surgery clinics, physician offices, dentist offices, and rehabilitation facilities.

In health care, the person receiving care may be called a patient, a resident, or a client. The name used depends on where the person is receiving care. When working in a health care facility the housekeeper should refer to the person receiving care by the name the facility prefers.

A hospital is a health care facility where patients who are very sick stay overnight to receive medical and nursing care. The length of time they stay depends on how sick they are. The length of stay in hospitals has shortened dramatically in the last ten years. This means the housekeeper will see a greater variety of patients and have more discharge rooms to clean. Hospitals also have many areas where patients receive treatment and return home.

A long-term care facility is a health care facility where people go to stay for a prolonged period of time. The people are called residents because this is their home. Many long-term care facilities are for elderly residents who can no longer care for themselves at home. A housekeeper who likes to get to know the clients and enjoys the elderly might choose a long-term care facility.

A mental health facility is a health care facility for clients who have mental health illnesses. These facilities may be inpatient, meaning the clients stay overnight, or outpatient, meaning the clients come to the facility for treatment and return home. In an inpatient mental health facility, the clients are usually there for a longer period of time. An outpatient mental health facility will have very different cleaning needs.

Outpatient clinics are places where clients come for diagnosis of illness, treatment, or rehabilitation from an illness. The outpatient clinics may be a part of a hospital or may be in a separate building designed just for outpatient procedures. Sometimes clients come to an outpatient clinic for surgery and return home the same day. These outpatient clinics may be called a surgery clinic. Even though a person receiving care may be referred to by different names, throughout this book the term client will be used.

Housekeepers are also needed in physician offices, dentist offices, and the offices of other allied health professionals. The duties of the housekeeper will include cleaning the exam rooms and waiting areas.

Departmental Assignments

When working in a hospital a housekeeper may be assigned to work in many different departments. Each area will have slightly different cleaning needs. Departments in a hospital might include patient areas, diagnostic and treatment areas, and specialty areas. Diagnostic means to find out what is wrong with the person. The diagnosis is made by a physician. Large hospitals have many units where the patients are grouped by their age or the type of illness being treated. Examples of patient units include the following.

- Medical units for general treatment of adults
- Surgical units for treatment of patients who have had surgery
- Pediatric units for treatment of infants and children
- Cardiac units for treatment of patients who have heart problems

There are many areas of the hospital where diagnosis and treatment are performed. Each area has very different cleaning

needs. Listed below are examples of hospital areas.

- The radiology department is where x-rays are taken.
- The cardio-pulmonary services department is where tests and treatment of conditions of the heart and lungs are performed.
- In physical therapy or occupational therapy departments, clients relearn to walk, have strengthening exercises, or relearn to care for themselves.
- In the laboratory, tests on blood and other body fluids and tissue are completed.
- The pharmacy is where the medications are distributed.
- In medical records, client charts are kept and dictation is completed.

Hospitals may have specialty areas such as obstetrics, intensive care, and diagnostic areas.

- Obstetrics is where babies are born.
- In intensive care units, the sickest patients are located.
- Diagnostic areas may include GI (gastrointestinal) testing areas or a cardiac cath lab where heart treatments are performed.

Chain of Command

The **chain of command** refers to the organizational structure within a health care facility. The chain of command helps to define who is responsible for specific duties within a department and who to report to when there is a problem or concern. A housekeeper will usually have a unit housekeeping supervisor who is in charge of the duties of a given area. The size of the health care facility will affect the number of housekeeping staff. Additional supervision training will be done between the housekeeper on the unit and the director of the housekeeping department.

Figure 1.1 - Chain of Command in Small Long-term Care Facility

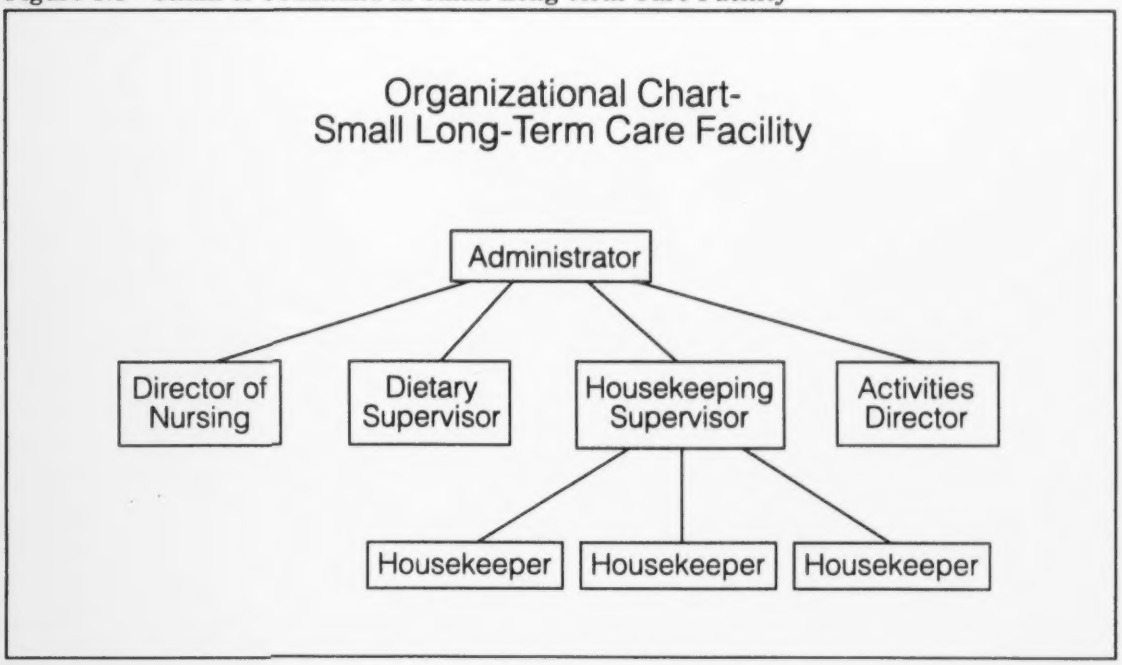
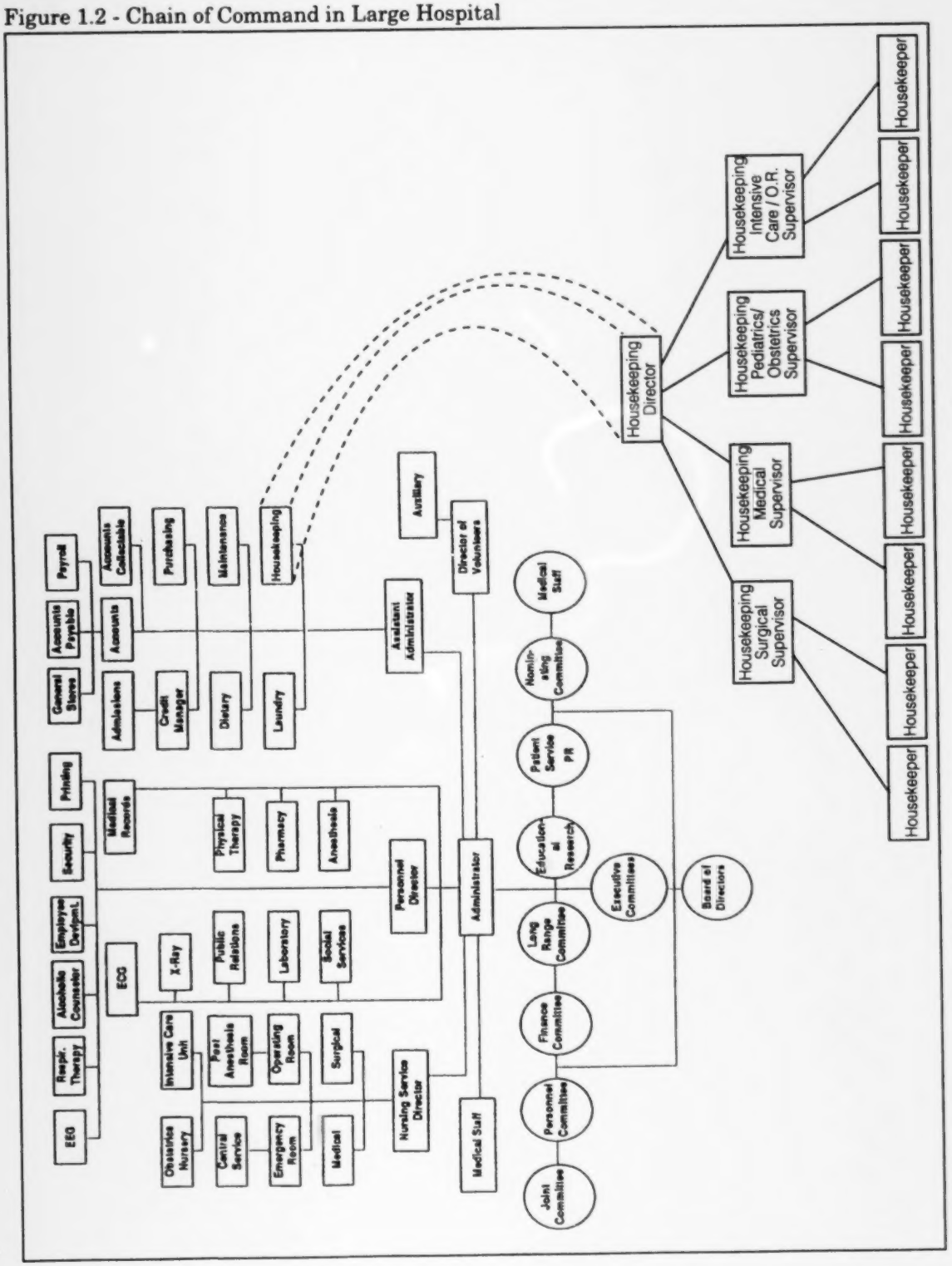


Figure 1.2 - Chain of Command in Large Hospital



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The director of the housekeeping department will ultimately be responsible to the administrator, president, or CEO (Chief Executive Officer) of a health care facility. See Figures 1.1 and 1.2 for examples of the chain of command in health care facilities.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: The Role of the Housekeeper

Activity Sheet

1. Describe the importance of housekeeping in providing quality care to clients.

   _____

   _____

2. List the overall mission of the housekeeping department.

   a. _____

   b. _____

3. Name general duties a housekeeper would be expected to perform.

   _____

   _____

   _____

   _____

4. Define job description.

   _____

   _____

5. Read the job description below. Based on the job description, determine which of the following tasks the housekeeper should complete. Place a Y (yes) by those tasks the housekeeper should complete and an N (no) by those tasks the housekeeper should not complete.

___ a. mop wet floors
___ b. call a nurse for a client
___ c. transfer a client from bed to chair
___ d. speak friendly to clients as you clean
___ e. dust furniture
___ f. open items on a meal tray for a client
___ g. restock paper towels in a client room
___ h. clean up a food spill in the dining room
___ i. empty a client's urinal
___ j. empty trash from a client's room
___ k. pour a glass of water for a client
___ l. buff the hallway floor

Job Description

Title: Housekeeper

Basic Responsibilities: Routine light housekeeping performed to meet standards of quality. Personal contact may include members of the resident's family, co-workers, and guests.

Job Duties: Perform various duties in the care, cleaning, and disinfecting of health care facilities.

Clean and restock restrooms throughout the shift: wet-mop floors; clean and disinfect sinks, stools, and commodes; clean and polish mirrors; wash walls; and restock restrooms with supplies as needed.

Wet-mop facility floors, prepare floors for waxing, apply wax, and buff floors. Vacuum carpet.

Clean client rooms including: empty trash receptacles, spot wash walls, dust furniture, clean windows, and clean blinds. Collect and distribute towels and linens. Make beds as directed.

Clean common areas such as lobbies, hallways, offices, meeting rooms, elevators, stairways, nurses station, and utility rooms including: empty trash receptacles, dust furniture, clean windows and blinds.

May be assigned work in areas requiring special use of disinfectants, cleaning techniques, and sanitation procedures such as in hospital isolation rooms, operating rooms, and laboratories.

Conduct spot checks of all mechanical and utility equipment on an established schedule to be aware of and locate problems. Report problems to supervisor to arrange repair or maintenance.

Working Conditions: Must be able to work flexible hours and days of the week, either early or late shifts, weekdays, weekends, and holidays.

Qualifications: Ability to read and write. Physical strength, coordination and stamina sufficient to perform assigned duties. Ability to perform housekeeping functions requiring cleanliness, thoroughness, responsibility, promptness, and dependability.

6. List five health care settings in which a housekeeper might be employed.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

7. List four patient areas within a hospital a housekeeper might be assigned.

   a. _____

   b. _____

   c. _____

   d. _____

8. List four diagnosis and treatment areas within a hospital a housekeeper might be assigned.

   a. _____

   b. _____

   c. _____

   d. _____

9. List three specialty areas within a hospital a housekeeper might be assigned.

   a. _____

   b. _____

   c. _____

10. Define chain of command.

    _____

    _____

Clinical/Laboratory Activities

1. Make arrangements with your instructor to tour an acute care facility, a long-term care facility, and a clinic to observe the different health care facilities and departments in which a housekeeper might work. After touring all three areas, write a short paper describing which facility you would like to work in most and why. Turn this paper in to your instructor.

2. Ask for a copy of the organizational chart in your clinical site. Review what each part means with your instructor.

Lesson 2:
Employment in a Health Care Setting

Objectives:

A. Match organizations and agencies that affect housekeepers working in a health care setting.

B. Identify requirements for employment in a health care setting.

C. Describe the importance of policy and procedure manuals.

D. Locate policies and procedures related to housekeeping.

Key Terms:

- Joint Commission on the Accreditation of Health Care Organizations (JCAHO)
- Accreditation
- Division of Aging
- Occupational Safety and Health Administration (OSHA)
- Environmental Protection Agency (EPA)
- Center for Disease Control and Prevention (CDC)
- Policy manual
- Procedure manual

Regulating Organizations and Agencies

Regulations and laws are written to protect society. In the health care industry these organizations and regulatory agencies are interested in making sure that the *public receives safe, high quality health care and that workers are safe while providing that care.* Health care organizations and agencies include: Joint Commission on Accreditation of Health Care Organizations (JCAHO), Division of Aging, Occupational Safety and Health Administration (OSHA), Center for Disease Control (CDC), and Environmental Protection Agency (EPA). The housekeeper, like all other staff in health care, must know and follow the recommendations of these regulatory agencies. The administrative staff will use the recommendations and laws of these agencies in writing policies and procedures.

The **Joint Commission on Accreditation of Healthcare Organizations (JCAHO)** is an independent, not-for-profit organization that accredits health care organizations. The mission of JCAHO is "to improve the quality of care provided to the public through the provision of health care accreditation and related services that support performance improvement in health care organizations." Hospitals and long-term care facilities are not required to be accredited by JCAHO. However, the public looks for this accreditation to assure them of quality care. **Accreditation** means that the facility has been evaluated by a survey team from JCAHO and meets certain minimum performance standards to assure the public of safe health care delivery. The health care facility will spend much time and effort preparing for an accreditation visit from JCAHO. Within the accrediting standards, there are minimum standards for housekeeping staff including: Management of the Environment of Care and Surveillance, Prevention, and Control of Infection.

The **Division of Aging** is responsible for licensing long-term care facilities. The Missouri Division of Aging is a part of the Department of Social Services. The *Long-Term Care Facility Licensure Law and*

Rules booklet is published each year by the Division of Aging. This booklet describes in detail the requirements for running a long-term care facility. Included in this document are rules for construction, fire safety, physical plant requirements, sanitation requirements, and administration and resident care requirements. The job of the Division of Aging is to assure that minimum standards have been met in the care of residents in the facilities. When state inspectors are in the facility, they will be observing the cleanliness of the facility, maintenance of the structure, and procedures used in trash disposal and prevention of the spread of microorganisms. A long-term care facility will strive to be "deficiency-free" in the delivery of care. If the Division of Aging cites a deficiency, the long-term care facility will be required to correct the problem or be at risk of losing their license and being shut down.

The **Occupational Safety and Health Administration (OSHA)** is the federal agency that sets health and safety standards to protect employees. The mission of OSHA is "to save lives, prevent injuries and protect the health of America's workers." The standards describe the limits of exposure to dangerous substances (such as chemical and radiation), the safety program that institutions must provide for their workers, and the conditions and procedures they must maintain.

The **Center for Disease Control and Prevention (CDC)** is an agency of the Department of Health and Human Services that conducts research, tracks statistics, and makes recommendations for controlling diseases. The CDC mission is "to promote health and quality of life by preventing and controlling disease, injury, and disability." The latest recommendation from the CDC on the spread of microorganisms is called the "Guideline for Isolation Precautions in Hospitals." This guideline includes *Standard Precautions* and *Transmission Based Precautions.* Practicing such precautions while working as a housekeeper will be essential to prevent the spread of microorganisms throughout the health care facility. Although the CDC cannot require a health care facility to follow their guidelines, some regulatory agencies may require that a health care facility follow a specific CDC guideline.

The **Environmental Protection Agency (EPA)** is a federal agency that sets regulations and provides information about the proper disposal of hazardous material. The EPA is concerned with hazardous material that has been disposed of or will be disposed.

Requirements for Employment

Once an individual has been hired for a specific job, the health care facility may require testing and immunizations. Common requirements include a physical examination, drug screening, a criminal background check, immunizations, and tuberculosis testing. These are all done to protect the employee and the clients within the health care facility. Some of the tests may be completed before the person begins work. Other tests or requirements may be done after the person begins work.

Many health care facilities require a new employee to have a physical examination. It may be done by a physician chosen by the health care facility or by a staff member in the employees' health department in large facilities. The exam is usually paid for by the employer. The physical exam assures the health care facility that the new employee can meet the physical demands of the job without causing harm to him or

herself or to the clients assigned to his or her care.

Drug screening is becoming common in health care facilities. The purpose is to identify employees who use illegal drugs. Because of the access to medications in a health care facility, facilities do not want employees to have a problem with drug abuse. A worker using illegal drugs could be very dangerous to a client's safety and well-being and will result in a poor quality of care. Use of illegal drugs is associated with an increased number of accidents, increased number of absences from work, and decreased productivity in the worker.

A relatively new requirement of the new employee is the criminal background check. In a criminal background check, the facility has the highway patrol check into the person's background. If the person has been convicted of a felony, then he or she will not be allowed to work in health care. A felon is someone who has committed crimes such as murder or robbery.

OSHA requires employers to inform employees of the risk of contracting the hepatitis B virus in the workplace. Employers are required to explain the risks and offer the option of receiving a three shot series to develop immunity to hepatitis B at no cost to the employee. If an employee chooses not to take the immunization, a form will need to be signed indicating that the risks have been explained and immunization is being refused.

Other immunizations such as diphtheria, tetanus, polio, and rubella may also be required by a health care facility. Most workers received these immunizations as children; however, they may require a booster.

Another test required by most health care facilities is a TB skin test. This test detects if the employee has been exposed to the tuberculosis bacteria. If an employee develops a positive TB skin test, further evaluation will be required.

Policy and Procedure Manuals

As a part of the orientation process, the new employee should be introduced to the policy and procedure manual for the area in which he or she will work. The **policy manual** describes how a health care facility will handle issues within the facility. These are the formal rules of the facility. For example, a facility will have a policy regarding employee absences, work assignments, hazardous waste disposal, or visiting hours for guests. It is important that all employees know where the policy manual is located and what is contained in the manual.

The **procedure manual** explains the steps an employee should use to complete a specific procedure. Procedures are written for every skill a housekeeper will be expected to perform. If an employee ever has a question about how a procedure is to be done in a facility, the procedure manual is the first place to look for answers. For example, there will be a procedure for cleaning windows, dust mopping floors, cleaning toilets, damp dusting the furniture, and many more.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 2: Employment in a Health Care Setting

Activity Sheet

1. Define the following initials.

   a. JCAHO: _____

   b. OSHA: _____

   c. CDC: _____

   d. EPA: _____

2. Describe the role of each of the following organizations or agencies.

   a. JCAHO: _____

   b. Division of Aging: _____

   c. OSHA: _____

   d. CDC: _____

   e. EPA: _____

3. List possible employment requirements and describe why each is necessary.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

   f. _____

4. Describe the value of policy and procedure manuals to the housekeeping employee.

   _____

   _____

Clinical/Laboratory Activities

1. Talk with staff in the Human Resources/Personnel office to find out what tests and immunizations are required by that facility for employment. Discuss the reason they require each item. Write this information down and turn it in to your teacher.

2. Locate the policy and procedure manuals at your clinical site. Write down the topic of three policies and four procedures that you think will be important to you. Turn this in to your teacher.

Lesson 3:
Developing Professionalism

Objectives:

A. Identify workplace behaviors that make up professional work habits.

B. Dress appropriately.

C. Use proper hygiene.

D. Work as a member of the housekeeping team.

E. Discuss the value of participating in a professional organization.

F. List ways to continue to upgrade your skills.

G. Match terms to their definitions.

Key Terms:

- Professional
- Competence
- Professional work habits
- Dependable
- Delegate
- Lifelong learning
- Continuing Education Units (CEUs)

Providing quality health care is the major goal of health care facilities. To reach this goal all members of the health care team must show professional work habits. Health care clients need to be confident that the care they are receiving is being performed safely and competently. Other factors that affect the competency and professionalism of the staff include how a person dresses, being clean and odor-free, and the ability to work together as a team. Failure to be successful in these areas is the most common reason an employee is fired.

Professional Work Habits

A **professional** is one who has competence in a particular field or occupation. **Competence** means that the housekeeper can perform the job duties. **Professional work habits** are behaviors exhibited by the housekeeper that allow those around him or her to think of him or her as a professional. In addition to performing the skills of the trade properly, a competent professional is one who exhibits the following work attitudes and behaviors: caring attitude, dependable, respectful, honest, enthusiastic, courteous, well-groomed, and practices good personal hygiene.

A caring attitude is the most important quality a health care professional can possess. People who choose a health care profession must like working with people. Clients in health care facilities often do not feel well and are dependent on the staff for care. The clients may be more irritable and easily upset than they would normally be if they felt well. The staff member who shows care to the client will be appreciated and remembered. When the housekeeper comes into a client room to clean, a friendly word and a listening ear can make a client's day better.

Being **dependable** means someone who can be counted on to do what is expected of him or her. A dependable employee is valued by an employer. Examples of dependable employee behavior include the following.

- Report to work each day when scheduled. When an employee is

absent, the work has to be completed by another staff member. This often requires another staff member to be called on to work an extra shift or the scheduled staff has to do extra work.

- Report to work on time. When an employee is late, all the work throughout the day is set behind.
- Perform assigned tasks quickly, thoroughly, and efficiently. An employee may complete a job very quickly, but if the job is not done to minimum standards the mark of quality care will be missed. An employee might always do a job very thoroughly, but if it takes too long to complete the job, then other tasks will not get done. An efficient worker is one who can balance thoroughness with speed.
- Take breaks and lunch as scheduled and return on time.

Another behavior considered a part of professional work habits is being respectful. The word respect means to honor or to show consideration for another person. Respect should be given to everyone the housekeeper meets. This includes administration in the health care facility, the supervisor for the housekeeping department, other members of the health care team, and most importantly, the client and visitors. Behaviors that show respect include the following.

- Allow a visitor to enter an elevator first.
- Avoid cleaning a client's room when the client is using a bedpan, bedside commode, or having a bath at the bedside.
- Knock before entering a room when the door is closed.
- Exhibit kindness and care when talking with clients.
- Open a door for a fellow worker who is helping a client.
- Use a confident tone of voice, yet not aggressive, when reporting a concern to a supervisor.
- Accept all people regardless of their illness, race, religion, sexuality, or gender.

Honesty is essential in all employees. An employee who has been honest in all situations is valued by the employer and is more likely to receive promotions. Honesty should be used in all situations. An employee can show honesty in many situations. Below are a few examples.

- Explain to a supervisor that a piece of equipment has been broken.
- Request an additional day off instead of just skipping work or calling in sick when you are not sick.
- Choose not to take supplies home for personal use. It is easy to accidentally take home a roll of tape, an extra pair of gloves, or even a tool that was left in the pocket. All things that were brought home accidentally should be returned to the health care facility. Talk to your supervisor to know what to do with supplies or equipment that have been outside the facility. Never knowingly choose to take supplies or tools home for personal use. This is stealing and raises the cost of health care.
- Be trustworthy with client belongings. Personal belongings are often visible when the housekeeper cleans a client room. Never take money, a watch or other jewelry, or anything that belongs to someone else.

An enthusiastic worker is a joy to work with. It is much more fun to work with someone who is glad to be at work, keeps a smile on his or her face, and is proud of all

the work he or she does. Enthusiasm spreads from one worker to another the same way someone who is negative and sad all the time can pull other workers down. Workers will spend almost 1/3 of their day in the workplace. Approaching work with a positive attitude and enthusiasm are very important for personal job satisfaction.

Be courteous when working with clients and coworkers. There are many common courtesies that the housekeeper can use.

- Address people by their name. Begin by using Mr., Mrs., or Ms., and the client's last name. This is the most formal way to address people. Many people today prefer to be called by their first name. This is appropriate if it is requested.
- Do not use "pet" names such as grandma, grandpa, honey, or sweetie. This is impersonal and should only be used when this is the client's preference.
- Always use "please" and "thank-you".
- Speak using appropriate grammar and avoid foul language.
- Do not interrupt others when they are speaking.
- Maintain self-control. Do not lose your temper.

Dress in appropriate work clothing for the work setting. The first impression a staff member makes is often based only on appearance. Many housekeeping departments will have a uniform that all housekeepers are expected to wear. If the housekeeper is responsible for washing the uniform, be sure it is always clean and unwrinkled. It should be washed after each work day. If the uniform tends to wrinkle, hang it up immediately after it has finished drying and iron it as necessary. The uniform should fit correctly. Wear approved

Figure 3.1 - Appropriate Appearance

work shoes that provide good support for the feet.

Appropriate dress also includes the hair style and jewelry worn. Choose a hairstyle that is appropriate for the work setting. It should be easy to care for and not get in the way of the work. The facility may have a policy regarding what type of jewelry is allowed. As a safety precaution when working with chemicals and around beds and furniture, limit rings to a wedding band, engagement ring, or class ring. Additional rings are unprofessional. Earrings should be post earrings and should not dangle below the ear lobe to help avoid being caught in something while working. Other piercings should be kept to a minimum since this does not represent a professional behavior and may be offensive to some clients.

Good personal hygiene is also essential since the housekeeper will be working around people throughout the day. Good personal hygiene also reflects good personal health. To achieve good personal hygiene follow the guidelines listed below.

- Bathe daily.
- Use deodorant daily.
- Brush teeth at least twice daily.
- Shave facial hair daily.
- Keep beards and mustaches neatly trimmed.
- Do not use strongly scented after-shave lotions or perfumes.
- Wash hands after using the bathroom.
- Keep fingernails clean, short, and neatly shaped.

The Housekeeping Team

Completing all the duties assigned to housekeeping in a quality manner and on time is the goal of the housekeeping team. A team is a group of people working together toward a common goal. In a health care setting, the group of people includes the housekeepers and their supervisors. The common goal is to keep the health care facility clean and odor-free and reduce the number and spread of microorganisms. Housekeepers are also a part of a larger team, the health care team. As discussed in Lesson 1, the health care team is made up of all the employees who are responsible to clients for providing quality client care.

Working together as a team takes the special skills needed to get along with other people and encourage one another. The most effective team is a team with a good leader, members who each know their job duties and perform them to a high quality standard at all times, who work to help one another, and who respect the differences among team members.

Often the ultimate success of a team is dependent on the skills of the leader. This leader may be a housekeeping supervisor or the director of housekeeping depending on the size of the facility. The team leader is responsible for delegating the job duties equally among the team members and observing the workers to be sure the work is getting done. To **delegate** means to assign the work to the employees most suited to complete the job effectively. The following are some things to remember when working with the team leader.

- Communicate respectfully at all times. The team leader (supervisor) has generally earned the additional responsibility by good job performance in the past, by additional education, and by exhibiting characteristics of a leader.
- Be sure the assignment is understood when accepting a delegated task; ask questions if there is uncertainty, and report back to the team leader when the task is complete.
- Keep lines of communication open with the team leader. Ask questions any time the assignment is unclear or there is a problem in completing the assignment. Report unusual events or things observed. Make suggestions to improve the way things are done.

Working as a member of a team means working with other people. People are not all alike. These unique differences are what make a team strong but also can make working together difficult. The following are suggestions for working effectively as a team member.

- Know which job duties have been assigned to you. Your first responsibility is to get the work done you have been assigned.
- Do your fair share. When every team member completes their job assignments, no one team member is overloaded.
- Help other members of the team whenever you can. Sometimes one team member has a heavier

assignment, or work that requires assistance. If you help when you can, team members are more likely to help you when you have a need.

- Get to know the other members of the team. Often the differences observed in other people can be appreciated when we really get to know the person.
- Look for the positive characteristics in other members of the team. All people have strengths and weaknesses. Focusing on the positive helps to enhance strengths and minimize weaknesses.
- Respect the differences in other team members. The strength in a team often lies in the differences within the team. One person may be a creative thinker, another may be really good at relating to people, another may know a different language. Some people are born leaders, others are better followers. When the team is able to make the most of the differences, the quality of work will improve.
- Avoid gossip at all times. Gossip always ends up hurting another team member and usually has nothing to do with the work of the team.
- Show appreciation. All people have a basic need to be appreciated. Saying thank you to a fellow team member for assistance, praising a team member for a great suggestion, or recognizing a kind act can build team relationships.

Participation in Professional Organizations

There are thousands of professional organizations for health care workers. Participation in an appropriate organization is a part of professional work habits. Professional organizations develop out of a need to share ideas, concerns, and assistance within professions. To become a member of an organization, the prospective member will have to meet the criteria for membership and pay a membership fee. Some organizations are exclusive and the prospective member must be licensed, certified, or otherwise associated with that group of people. Other organizations allow anyone with an interest in the mission of the organization to become a member.

Organizations for housekeeping staff include the American Society for Health Care Environmental Services and the International Executive Housekeepers Association. There are several benefits to participating in an organization.

- There are opportunities to share current information about the profession.
- A network of professionals can share ideas and get suggestions on problem solving.
- There is a group of people to lobby with legislators when there are legislative issues within the profession.
- Many opportunities for continuing education are offered.

Lifelong Learning

There was a time in history when completing the 8th grade was quite an accomplishment. Soon graduation from high school was the minimum standard. A four-year post-high school education was only for the brightest or the wealthiest. Today many students pursue formal education beyond a high school diploma. The entry into the housekeeping profession is usually by on-the-job training. Because technology changes so fast, all professionals need to continue to learn throughout their lives. This is called **lifelong learning**. There are many ways workers can keep up-to-date about changes in their jobs.

- Participate in inservice opportunities provided by the health care facility. These are usually at no cost to the employee. Some inservices are mandatory. A sign of a true professional is one who makes the extra effort to improve him or herself.
- Read professional journals. Often the benefits of belonging to a professional organization include a subscription to a journal about the profession. Sometimes these journals include articles in which the reader can attain continuing education units (CEUs). **Continuing education units** are usually figured based on the number of contact hours of education involved. After reading the article, the reader writes for the written test and pays a fee. If successful in passing the test, a certificate indicating the number of continuing education units is mailed to the reader.
- Attend professional seminars. Information about professional seminars may be obtained through the education department of the health care facility, your supervisor, or through a professional organization or journal. Seminars are usually at least one day in length and a fee is charged.
- Pursue formal education. To improve opportunities for promotions, formal educational training may be completed at a technical school, community college, or university.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written evaluation for this unit. A score of at least 80 percent indicates you may proceed to the next unit.

Lesson 3: Developing Professionalism

Activity Sheet

1. Define professional work habits.

   _____

   _____

2. List behaviors that are included as a part of professional work habits.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

   f. _____

   g. _____

   h. _____

3. Describe what it means to be a dependable employee.

   _____

4. Discuss the importance of dress and hygiene for the housekeeping employee.

   _____

   _____

   _____

5. Discuss characteristics of an effective team.

   _____

   _____

6. List five ways you can work effectively as a team member.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

7. List the benefits of belonging to a professional organization.

   a. _____

   b. _____

   c. _____

   d. _____

8. List four ways of improving your knowledge and skills.

   a. _____

   b. _____

   c. _____

   d. _____

Clinical/Laboratory Activities

1. Talk with the housekeeping supervisor at your clinical site. Ask the following questions and write down his or her answers. Turn the responses in to your teacher.

   a. What work habits do you look for in your best employees?

   b. Tell me why you believe dress and hygiene are so important to being a good employee.

c. What should I do to be a good team member?

d. What opportunities does this facility have for me to upgrade or keep my skills current?

2. At your clinical site observe fellow employees. Write down what you observe about how they dress and how they work with other team members. Does this make you feel positive or negative about the employee?

3. Participate in your school's local Vocational Student Organization.

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: The Role of the Housekeeper Rating _____

Comments: _____

_____

Activity Sheet: Employment in a Health Care Setting Rating _____

Comments: _____

_____

Activity Sheet: Developing Professionalism Rating _____

Comments: _____

_____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Unit II

Interpersonal Relations

Getting along with people is an essential part of being successful on the job. Everyone deserves to be treated with respect. As the customer in the health care facility, the client's needs must come first. Maintaining confidentiality, knowing and respecting client rights, and using good communication skills when interacting with clients are effective ways of building positive relationships.

Competing for clients is essential for survival in most industries today. To attract clients to a health care facility, the facility is very concerned about customer service. A client who was treated kindly and with respect and has good feelings about the services received will spread a positive image of the facility to people. The housekeeper plays an important role in customer satisfaction.

Effective communication is important to good interpersonal relationships. Communication includes both verbal and nonverbal and is important between staff members as well as when working with clients. Observing and reporting what has been observed is a key element in quality client care.

Unit Lessons

Respecting Clients

Customer Service

Communicating With Others

Lesson 1:
Respecting Clients

Objectives:

A. Maintain client confidentiality.

B. Respect clients' rights.

C. Identify ways to respond to client requests.

Key Terms:

- Respect
- Client confidentiality
- Advance directive

All people deserve to be respected by other people. **Respect** means to honor or hold in high esteem. Most people have been taught general courtesies and how to show respect from a very young age. This lesson will cover the importance of confidentiality in a medical setting. It will also include a discussion on the ways to respect client rights and respond to client requests.

Client Confidentiality

Client confidentiality is extremely important in the health care setting. **Client confidentiality** means to keep client information private. As the housekeeper completes daily cleaning tasks, conversations between a patient and a visitor or between a client and a physician may be overheard. This information should not be repeated to anyone. Often clients do not want others to know they have been hospitalized. Just sharing information that Mrs. Smith's little girl, Samantha, is in the hospital could endanger their lives. Sharing a diagnosis of a sensitive nature such as a miscarriage, a sexually transmitted disease, or plastic surgery can upset and embarrass a client and might cause consequences. A husband may not yet know that his wife is pregnant or a spouse may not understand how their partner could have acquired a sexually transmitted disease. It is usual for a client to discover that the housekeeping staff is friendly and will lend a listening ear as they work. A client may share something about his or her personal life in strict confidence. Just talking it through may help the client in the decision making process. This information should be held in confidence.

Maintaining client confidentiality means not sharing information with others. The housekeeper must not talk about clients in the elevator, the cafeteria, the restroom, or any other public place. Gossiping about patients is ethically wrong and illegal. If a client reveals something that may be important to his or her care, this information should be reported in a private place to the nurse in charge of the client's care. If there is uncertainty about whether to share information regarding client care to the nursing staff, talk with the housekeeping supervisor.

The Rights of Clients

In the past, many clients rarely asked questions of health professionals. They listened to what their doctor told them to do and accepted their recommendations. The health care consumer of today expects to be informed, to be allowed to make their own choices based on options presented, and to be an involved part of the health care team. The client is the center of the health care team. As early as 1972 the American Hospital Association recognized the

importance of the client by adopting the Patient's Bill of Rights. The current bill of rights includes concepts such as the right to:

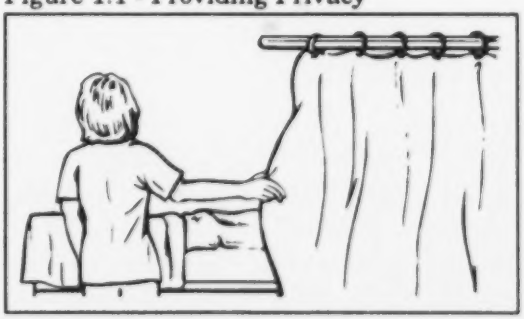
- Considerate and respectful care.
- Be informed about his or her condition.
- Make decisions about his or her care and to refuse recommended treatments.
- Have an **advance directive**, which is a legal document that tells family and health professionals the wishes of the client if they are unable to speak for themselves.
- Privacy.
- Confidentiality regarding medical records and communication.
- Review his or her own medical record and to have the information explained if necessary.
- Receive the care necessary within the ability of the hospital.
- Be informed about business relationships that might affect the care available or provided.
- Choose if he or she wants to be involved in human research.
- Continuity of care and to be informed of options when hospital care is no longer needed.
- Be informed about hospital policies and procedure that relate to patient care and treatment.

Since the time that the American Hospital Association proposed the Patient's Bill of Rights, the long-term care industry has written its own document relating to the rights of residents in long-term care. The regulations governing long-term care in Missouri require Resident Rights to be posted in the facility and that residents be informed of their rights when they are admitted.

Several client rights apply to the job of the housekeeper. One of them is the right to considerate and respectful care. This is a basic right and all members of the team should remember that the client is the customer. Any time the housekeeper is in contact with a client, he or she should be considerate and respectful. When cleaning in the client room, remember to smile and say a few pleasant words to the client. Common courtesies such as holding a door open for a client or visitor, allowing a client to go ahead in a line, or addressing the client by Mr. or Mrs. are ways to practice this right.

The right to privacy is very important to clients. If a client is bathing or using the bathroom when it is time to clean, then go on to another task and return in a few minutes. If the door to a room is closed, the housekeeper should knock before entering. The curtain should be pulled around the bed of a client who is exposed for any reason. If, upon entering a room, the housekeeper notices that the curtain has not been pulled, he or she should just close it without making an issue of the lack of privacy, as illustrated in Figure 1.1

Figure 1.1 - Providing Privacy



Confidentiality of the medical record and communication are other rights the housekeeper should maintain. The confidentiality of communication has already been discussed. The medical record is a written document that should also be maintained in confidence. The housekeeper

would rarely need to view a client's chart. However, if the housekeeper notices an open chart (medical record) or reads information about the client from the computer screen, this information is to be held confidential just like oral communication. Clients have the right to see their own medical records, but it is not the responsibility of the housekeeper to give the medical record to the client. If a client should ask to see his or her medical record, a suggested response would be, "I will let the nursing staff know you would like to see your medical record. It is valuable to have a health professional with you to explain what has been written and answer your questions."

Responding to Client Requests

Members of the health care team commonly wear uniforms or scrubs and are dressed similarly. Often telling the difference between the nurses, physical therapists, radiology technicians, dietary staff, or housekeeping staff is difficult. Name tags help clients recognize the job titles of the different health care staff, but the titles can be confusing to clients who are not familiar with the health care field. Occasionally a client may ask the housekeeper to do something that he or she has not been trained to do. The following paragraphs give suggestions of how to respond when asked to do something for a client that must be declined. Remember that maintaining a considerate and respectful tone of voice when responding to client requests is important.

A common request of clients is for help in being transferred from the bed to the chair or from the chair to the bed. This is often asked of anyone who enters the room, but it is inappropriate for the housekeeper to help with this task for two reasons. First, the housekeeper has not been trained in this skill. Second, it may not be appropriate for the client to go back to bed yet or the client might be on bed rest. An appropriate response might be, "I am unable to assist you back to bed, but I will let your nurse know you are ready to return to bed."

Another common request is for assistance to the bathroom. Often clients need to go right away or have been waiting for some time for assistance. Assisting the client is inappropriate because the housekeeper has not been trained in assisting a client to ambulate or work with the tubes that may be attached to the client. The client may also need urine measured, strained, or the color observed. An appropriate response might be, "I can see you need assistance right away. Since no one has been able to help you yet, I will see if I can find your nurse and let him or her know of your need." If the client has not notified the nursing staff of their needs by using the call system, it may be appropriate to explain that housekeepers do not have the training to assist them, but that a nurse can be contacted by pushing the call button.

Requesting a drink of water is a common request of the housekeeper. Assisting a client with a drink of water seems very simple; however, the client may not be allowed fluids or may be on restricted fluids. The housekeeper might say, "Put your call light on and your nurse will help you."

The client might ask for assistance to raise the head of the bed. As with the previous situation, this seems very easy, but some medical conditions prohibit raising the head of the bed. The housekeeper might state, "I am unable to help you with this, but I will let your nurse know you would like assistance."

The housekeeper might comment to the client that he or she is getting ready to take a break. This might prompt the client to ask for a beverage or snack from the vending machines. This is inappropriate because the client might be on a special diet that restricts certain foods or beverages. The housekeeper might say, "I'm not allowed to get you anything from the vending machines, but I can let your nurse know that you would like something. They keep some soda and snacks at the nurses station."

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: Respecting Clients

Activity Sheet

1. Define the following words from the reading.

   a. respect: _____

   b. client confidentiality: _____

   c. advanced directive: _____

2. List ways the housekeeper can maintain confidentiality of client information.

   a. _____

   b. _____

   c. _____

3. List three client rights that a housekeeper should maintain for clients.

   a. _____

   b. _____

   c. _____

4. Write appropriate responses to the following client requests.

   a. Mrs. Smith is sitting in her bedside chair. She is moaning as you enter her room to clean. She asks you to help her get back into bed.

   _____

   _____

   b. Mr. Davis is laying in his bed when you enter his room. His water pitcher is at the bedside, but he cannot reach it. He asks you to help him get a drink of water.

   _____

   _____

c. Ms. Johnson is hollering as you enter her room about needing to go to the bathroom. "Won't anybody help me?" she says.

_____

_____

d. You have been cleaning the room of this client for a week. You have enjoyed getting to know Mr. McDonald. He says he is starving on this hospital food and asks you to get him a bag of chips from the vending machine.

_____

_____

Clinical/Laboratory Activities

1. Talk with three staff members about the importance of confidentiality in the health care facility.

2. Tour one or more clinical sites and look for the Resident Rights posted in the facility.

3. Ask the nursing supervisor to assign an appropriate client to interview about the importance of resident rights to him or her.

4. Write a one page paper reporting what you learned about confidentiality and resident rights from staff and resident interviews.

Lesson 2:
Customer Service

Objectives:

A. Identify the customers of the housekeeping department.

B. Provide effective customer service.

C. Practice common courtesy to enhance customer relations.

D. Describe the impact a housekeeper has on the image of a health care facility.

Key Terms:

- External customers
- Internal customers

Housekeeping Customers

For a business to be successful it must satisfy its customers. The health care industry is in the business of providing services to customers. The services include prevention of illness and promotion of wellness, and treatment of illness. According to one study, the primary reason businesses lose customers is because they are turned away by the lack of caring of an employee.

The most obvious customer in the health care industry is the client. There are other customers however. Another group of customers are clients' families and visitors. All of these are referred to as external customers. **External customers** are those people outside the organization who choose the product or service a business offers. Another group of customers are the internal customers. **Internal customers** are those people who work within an organization and who rely on the services of a housekeeper in order to complete their job. These customers are the staff who work within the facility—the other members of the health care team.

Providing good customer service should be the goal of every staff member. Qualities of a professional housekeeper were discussed in Unit 1, Lesson 3 and respecting the client was discussed in Unit 2, Lesson 1. These behaviors will lead to good customer service. The following guidelines are additional ways the housekeeper can provide good customer service to the external customers - the client, client's family, and visitors.

- Smile when greeting the client or visitor. The smile is a universal symbol of friendliness. A smile can brighten a person's day and leave a positive impression.
- Speak in a pleasant tone of voice. Tone of voice often speaks more clearly than the words spoken. A housekeeper who responds with a friendly voice will put customers at ease and help them feel important.
- Listen to what the client or visitor says. Taking a few minutes to listen to a client's story lets the client know all the staff care about his or her needs. Stopping to answer a question makes the client or visitor feel cared about.
- Place the needs of the client first. It may be time for lunch break, but cleaning up a spill or accident first can help the client overcome embarrassment and prevent a possible injury.
- Assist clients whenever possible to get the help they need. For example, a visitor might ask for directions to a client room, the restroom, or the

cafeteria. A friendly housekeeper who provides directions with a smile will be appreciated.

- Perform the job to a high standard of quality. The clients and visitors will make a quick judgment about the health care facility by looking at the cleanliness of the client rooms, waiting areas, and restrooms. Clean, fresh smelling, well-stocked restrooms will leave a good impression.
- Open the door or hold the elevator for the client. These common courtesies will leave a positive impression.
- Approach each task with a positive attitude and remember the housekeeping staff is there to serve the customer. The job exists because a customer has a need. A positive attitude makes the customer feel important.
- Follow through with commitments. If a client is expecting an answer to his or her request, follow through with the request and report back to the client. If a promise is made to come as quickly as possible to clean up a spill, then follow through with that promise.

Seeing the clients and visitors as customers is easy. Often staffs forget that other members within the health care facility are also customers. When all staff work together to serve one another, everyone can do their job to a higher standard and ultimately the external customers —the clients and visitors—are better served.

To serve the internal customer effectively remember the following suggestions:

- Smile and speak pleasantly to staff when asked to complete a job. When called to mop a spill, put a smile on your face and in your tone of voice and follow through as quickly as possible.
- Maintain a positive attitude and working relationship with staff. Value your job and complete each task with quality in mind.
- Work efficiently and with high quality standards.
- Use positive communication skills.

Housekeeper Impact on Facility Image

Each health care worker contributes to the image a client develops of a health care facility. Housekeeping staffs are involved in direct contact with the customers of the health care facility. A friendly person with a positive attitude will make a lasting positive impression about the health care facility.

First impressions are also important. A clean facility is expected in a quality health care facility. A customer who walks into a health care facility that has odors will automatically question the quality of the care provided.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 2: Customer Service

Activity Sheet

1. Describe what is meant by the term external customers. List the groups of external customers for the housekeeping department.

   _____

   _____

2. Describe the internal customers of the housekeeping department.

   _____

   _____

3. List six ways the housekeeper can provide effective customer service to external customers.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

4. You walk into a client's room to do your routine morning cleaning. Write what you might say to greet the client.

   _____

5. You are waiting at the elevator with several visitors. The down elevator arrives. How might you provide customer service to those visitors?

   _____

6. You are mopping the floors in the hallway as some visitors walk by looking at the sign with a very confused look on their faces. You hear one of them say, "I don't know where we are." Write your response.

   _____

7. You are cleaning the dining room when you are contacted to clean a blood spill in a client room. How will you respond to your internal customer who has placed this request?

_____

8. Describe the importance of the housekeeper to the overall image of the health care facility.

_____

_____

Clinical/Laboratory Activities

1. Identify the person who is responsible for public relations at the health care facility or facilities where you complete your clinicals. Set up an interview to discuss the job of public relations and the importance of customer service. Write a one page paper reporting your findings.

2. Observe interactions between housekeeping staff and clients, visitors, and other staff. Describe each interaction and tell why it reflected positive or negative customer service. If you observed negative customer service, write what you would have done differently.

Lesson 3:
Communicating With Others

Objectives:

A. Explain the difference between verbal and nonverbal communication.

B. Identify communication tools staff use within a health care setting.

C. Identify client situations that must be reported immediately.

D. Report client situations appropriately.

E. Report building and equipment maintenance needs.

Key Terms:

- Verbal message
- Nonverbal message
- E-mail

Effective communication is essential to promote positive interpersonal relationships and efficiency within a health care facility. In the *Health Care Assistant Core* Curriculum the primary components of communication—a sender, receiver, method of transmitting the message, and feedback were discussed. This lesson will discuss how those components apply to the housekeeper in the health care setting.

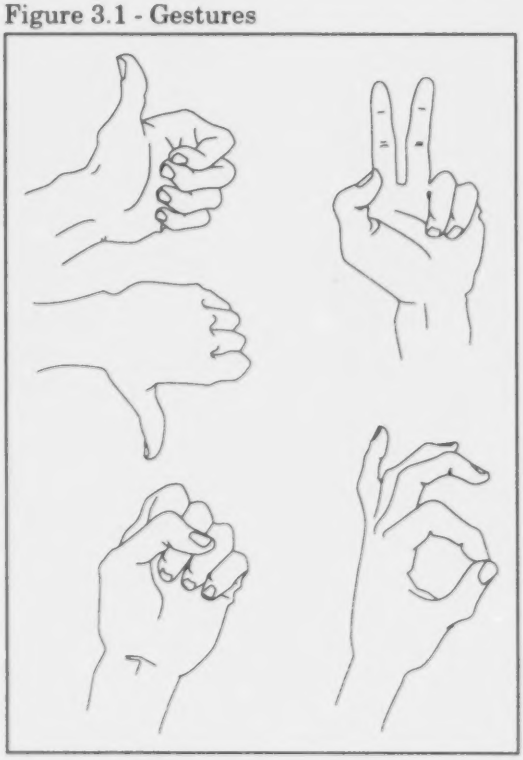
Verbal and Nonverbal Messages

Working relationships with coworkers and relationships with customers will be improved by using effective communication skills. The housekeeper should choose words carefully to be sure the intended message is sent. Active listening skills are also important so the message is understood. The nonverbal message and the verbal message must agree. The **verbal message** is the spoken or written word. A **nonverbal message** is communication without words. Examples of nonverbal communication include gestures, facial expression, body language, and tone of voice. Examples of gestures can be found in Figure 3.1. If the verbal and nonverbal messages do not agree, the receiver may not understand the message correctly.

Gestures

- Peace sign
- Thumbs up or down
- A clenched fist
- The OK sign

Figure 3.1 - Gestures



Facial Expressions

- A smile
- A frown
- Raising the eyebrows
- A wink
- Rolling the eyes
- Eye contact

Body Language (position of the body)

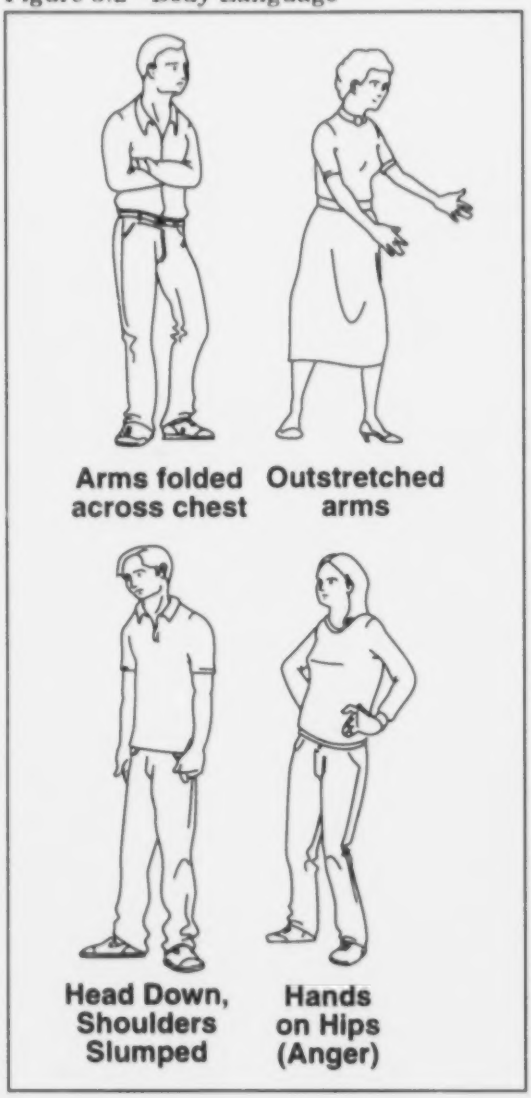
- Arms folded across the chest is a defensive stance.
- Outstretched arms are a welcoming stance.
- The arm reaching out to shake hands is welcoming and professional.
- Hands placed firmly on the hips may indicate anger.
- Head down and slumped shoulders means a lack of confidence or depression.
- Arms relaxed at the side and swinging freely indicates open, relaxed, and confident.

Tone of Voice

- A gruff tone of voice reflects anger.
- A gentle tone of voice reflects caring.
- A hesitant tone of voice or excessively quiet tone of voice reflects a lack of confidence.
- A strong tone of voice with an even pace reflects confidence.

Nonvervbal communication can be misinterpreted just as easily as verbal messages. Misunderstandings may be harder to clear up because the person speaking may not be aware of the nonverbal message that he or she is sending. When communicating with others, be careful that the verbal message and the nonverbal message agree. If they do not, the nonverbal message may send the stronger message.

Figure 3.2 - Body Language



Communication Tools

There are many ways of communicating with the other members of the housekeeping staff and the health care team. Methods of transmitting messages include: face-to-face, telephone, fax machine, pager, intercom, e-mail messages, and written memos or notes.

Oral Communication

The previous section reviewed the importance of verbal and nonverbal communication between coworkers and customers. Communication will be improved if the housekeeper remembers these important suggestions.

- Match the verbal message with the nonverbal message.
- Be aware of any blocks to communication such as language differences, hearing loss or deafness, blindness or visual impairment, or excessive environmental noise.
- Listen actively. Keep an open friendly posture, concentrate on the speaker's words, ask questions to clarify, be patient so the person can think and convey his or her thoughts.
- Maintain eye contact and sit or stand at the same level as the person speaking.

Telephone Communication

The housekeeper may receive a telephone call requesting assistance with a job elsewhere in the facility or receive a page over the intercom requiring a return telephone call. The following are tips for telephone etiquette.

- When receiving a telephone call, answer by giving the name of the facility, unit within the facility, name, and title. For example, "Hello, Goodcare Hospital, surgical unit. This is Julie Neighbors, housekeeper. May I help you?"
- Speak clearly and do not talk too fast.
- Use a pleasant tone of voice. Smile when you speak; it will be reflected in your tone of voice.
- Personal telephone calls at work are not appropriate.
- Take notes when receiving detailed instructions about a job.
- When leaving a message on voice mail or an answering machine, make the message short and to the point, but be sure it contains all the necessary information. For example, when calling to request a day off next week, include your name, the date and time you are calling, and the specific date you need to be absent. Do not just say next Tuesday, but state Tuesday, April 23rd. You may need to include the reason you need this day off, but keep the details as brief as possible.

Fax Machine

Many health care facilities use a fax machine to communicate physician orders from one department to another. The fax machine scans the written word and sends it across telephone lines to another location. A cover page is used when sending a fax so the receiver will know who the fax is for and who sent it. The information sent by fax machine is considered confidential just like any other type of written communication or any other part of a medical record. The housekeeper should not read a fax unless it is addressed to him or her.

Pagers or Beepers

A pager is a common tool in health care facilities. Each pager works differently. Some pagers beep or vibrate and the wearer must call the paging service to get the message. Some pagers allow the sender to key in the number to be called. Some allow the sender to key in a short message.

Physicians and administrators have carried pagers for some time. It is becoming more common for other staff to carry a pager thus resulting in more efficient response to the client. Some housekeeping supervisors will

carry a pager. This makes him or her readily available to assist with problem solving or to receive information about work that needs to be done. It is common courtesy to return the page as soon as possible. When there is a delay in responding to the page, there is a breakdown in communication.

Intercom or Overhead Page

This type of communication is broadcast throughout the health care facility with speakers. Because frequent intercom use can be annoying, pagers are being used more often. The intercom is generally activated through the telephone system.

The housekeeper will be receiving intercom messages more often than placing them. The following are tips for placing an intercom message.

- Use a slow pace when speaking.
- Make the message short such as, "Mr. Michael please call 411, Mr. Michael please call 411."
- Repeat the message. Typically the receiver will hear his or her name, but may not get the message or number to call.

E-mail Messages

E-mail stands for electronic mail. The message is typed on a computer and then sent electronically to the receiver's computer. The message is available to be read by the receiver almost immediately. The housekeeping supervisor may frequently receive e-mail messages. As computer access becomes more common, assignments to the housekeeping staff may be made by leaving e-mail messages. For e-mail to be an effective communication tool the receiver must check for messages on a regular basis. E-mail should generally not be used for personal messages.

Like other written communication, e-mail messages are private and should not be read by others. Computers often require a password to gain access to a specific staff member's e-mail messages. The password is a method to keep information on the computer confidential. Passwords should not be given to other people. As with any other type of written communication, be sure to communicate complete thoughts and proofread what has been written to be sure it is accurate. Spelling should be correct.

Written Memos or Notes

A written memo or note is appropriate in many situations. It is helpful to write a note even if there was direct communication with the person regarding a situation. Supervisors are very busy with many responsibilities and the written note serves as a reminder. For example, you have reported to your supervisor that there is frayed carpet in room 211 that needs to be replaced because it is a safety hazard. A quick note helps the supervisor remember this message when he or she returns to the office.

A memo is a good choice to request vacation or special days off. This gives the supervisor a record of the request as well as one for the housekeeper to keep in his or her file. It should be dated and signed.

Written messages should be legible, contain complete thoughts, and contain correct grammar and spelling. Use a small spelling dictionary if necessary to check accuracy.

Emergency Situations

The housekeeper may be in a client's room completing cleaning duties with no other team members present. The housekeeper is not trained to provide direct client care; however, it is important to recognize situations that indicate a client is in distress. The nursing staff should be notified immediately if a client exhibits signs of distress. Examples might be:

- The client is not breathing.
- The client is gasping for breath or states, "I can't get my breath."
- The client's skin has a bluish color.
- The client states a need to use the restroom immediately.
- The client appears to be in pain and requests help.

CAUTION: If any of these situations occur, **stop cleaning immediately and report the situation to the nursing staff.**

Building and Maintenance Needs

Routine duties of the housekeeper include observing the facility for any safety hazards or maintenance needed on the building. Hazards, such as the following examples, should be noted and reported to maintenance.

- Wallpaper that is peeling away from the wall or is stained and dirty.
- Loose floor tiles that could cause someone to catch a shoe heel and trip.
- A sink that has a continuous drip.
- Walls that needs to be painted.
- Lights that are not working.

Equipment needs to be kept in good working order. Cleaning equipment is a large expense for the health care facility. If equipment is not working correctly it should be reported to the housekeeping supervisor. If equipment is not fixed, the equipment may become damaged beyond repair or it could become a safety hazard for the facility and for the worker.

Each facility will have a policy regarding who to notify about maintenance needs and equipment repairs. For example, a facility may have the housekeeper write a note and put it on the supervisor's desk or a form may need to be completed reporting maintenance needs.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written evaluation for this unit. A score of at least 80 percent indicates you may proceed to the next unit.

Lesson 3: Communicating With Others

Activity Sheet

1. Mark the following examples as **V** for verbal communication or **N** for nonverbal communication.

   a. _____ the words "I love you"
   b. _____ hug
   c. _____ shrugging shoulders
   d. _____ saying "Good Job"
   e. _____ speaking in Spanish
   f. _____ tone of voice
   g. _____ standing with arms crossed
   h. _____ the statement "You're a good worker"
   i. _____ anger in the tone of voice

2. Discuss the relationship between the verbal message and the nonverbal message.

   _____

   _____

3. List seven ways staff communicate with each other in a health care facility.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

   f. _____

   g. _____

4. List four ways to make oral communication better.

   a. _____

   b. _____

   c. _____

   d. _____

5. List five tips to better telephone communication.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

6. Why is it a good idea to leave a written note even though you have already communicated the message verbally?

   _____

7. List four client emergency or crisis situations the housekeeper should report immediately.

   a. _____

   b. _____

   c. _____

   d. _____

8. Give four examples of building maintenance needs that should be reported to the supervisor.

   a. _____

   b. _____

   c. _____

   d. _____

9. You have been buffing the floors in the hallway when you notice the electrical plug on the buffer is frayed. Write a note to report this problem.

_____

_____

_____

Clinical/Laboratory Activities

1. Have your instructor assist you to write and send an e-mail message. This message can be to a counselor, the director, or another staff person who receives e-mail. The message should be written with complete thoughts and correct spelling.

2. Role play a telephone conversation between you and your department supervisor. In this situation you must page your supervisor, answer the telephone correctly, and carry on a conversation with the supervisor. Discuss the appropriate procedure to follow when you are feeling ill at work.

3. Role play interaction with a client who requests your assistance to the bathroom. This client's need is very urgent and he or she is very persistent.

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: Respecting Clients Rating _____

Comments: _____

_____

Activity Sheet: Customer Service Rating _____

Comments: _____

_____

Activity Sheet: Communicating with Others Rating _____

Comments: _____

_____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Unit III

Infection Control and Safety

The Occupational Safety and Health Administration (OSHA) plays a large role in making the work environment safe. Many regulations have been developed to prevent injury to workers. The challenge for the employer and employee is to follow these regulations.

Practicing safe work habits is a critical skill for the housekeeper. The housekeeper will work with many chemicals throughout the workday. It is important for the housekeeper to know how to handle these chemicals correctly and what to do in case of a spill or splash. The first lesson discusses how to use, mix, label, and store chemicals safely.

The housekeeper will frequently be in contact with potentially infectious microorganisms. Lesson two will discuss the prevention and spread of microorganisms throughout the facility and safety precautions to use to protect the housekeeper from infection.

Each staff member in a health care facility has responsibilities in an emergency such as a fire, tornado, or disaster. The third lesson will review responsibilities in responding to emergencies, recognizing suspicious situations, and the reporting procedures for each.

Unit Lessons

Safe Work Environment

Working With Cleaning Chemicals

Infection Control

Preventing and Responding to Emergencies

Lesson 1:
Safe Work Environment

Objectives:

A. Maintain a safe work environment.

B. Identify the role OSHA plays in regulating safe work environments.

C. Identify the purpose of Material Safety Data Sheets (MSDS).

D. Locate MSDS in your facility.

E. Recognize radiation sign and explain the potential danger of radiation.

F. Use safe habits when operating electrical equipment.

G. Use a ladder appropriately.

Key Terms:

- Body mechanics
- Bloodborne pathogen standard
- Exposure control plan
- Hazard communication standard
- Material Safety Data Sheets (MSDS)

Practicing safe work habits is a critical skill in industries. Safe work habits reduce the chance of workers being injured. Injuries can result in long-term disability, loss of time and wages, and expensive medical bills. Health care facilities must be concerned about the safety of their workers, costs incurred from workers compensation insurance, and possible lawsuits as a result of an unsafe environment. Promoting safety is a high priority of administrative staff. In return, staff members are expected to use safe work habits. They are evaluated on their use of safe work habits and may be disciplined if safety rules are not followed.

Maintain a Safe Work Environment

The housekeeper will be concerned about safety in every job performed throughout the day. Always use the safety steps in each procedure every day. The following are examples of safety practices that will be used daily.

Place "wet floor" signs properly. Bright yellow plastic signs are placed in an area that has recently been mopped to warn passers-by to walk around or with caution because the floor may be slick. As the housekeeper begins to mop up a spill or a section of a room or hallway, the wet floor sign should be displayed. The wet floor sign should remain in place until the floor is completely dry.

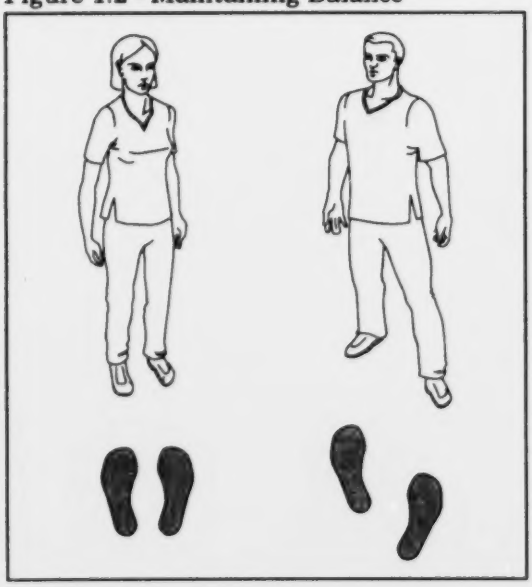
Figure 1.1 - Wet Floor Sign

Use proper body mechanics. Proper **body mechanics** means using the normal strengths of the body to prevent injury when moving and lifting objects. Using

proper body mechanics keeps the body in proper alignment, uses the longest, strongest muscles for lifting, maintains balance, and proper posture. The following is a review of the basic principles of body mechanics applied to the job of the housekeeper.

- Maintain a broad base of support. Remember that a glass with a large base will not tip over nearly as easily as a tall, slender glass. A broad base of support helps maintain balance. When mopping a floor, feet should be kept about 12 inches (or shoulder width) apart. Shift the body weight while mopping to maintain the bodies center of gravity and balance. Figure 1.2 shows how to properly position the base of support.

Figure 1.2 - Maintaining Balance



- Use the longest, strongest muscles of the legs to lift. When lifting a box squat down, move the box close and straighten the legs to stand. This way the strong leg muscles rather than the weaker back and arm muscles do the work. Figure 1.3 illustrates the correct way to lift a box.

Figure 1.3 - Lifting an Object

- Bring the object close to the body when lifting or carrying an object. When carrying a pile of clean linens to make beds after the discharge of a client, hold the pile close to the body to help maintain balance. Do not carry the linens directly against the uniform. This could spread microorganisms from the uniform to the clean linens.

- Keep the back in proper alignment. Do not twist, pivot with the feet instead. Keep the back in proper alignment when reaching to pick up a trash can and to empty the trash. Even if the trash can is light, an injury to the back can still occur if there is twisting.

- Use the weight of the body to help when pushing an object. Avoid pulling loads since that can cause strain on the back. Even when mopping the floor, shift the weight from foot to foot while moving the mop. Shifting weight uses the strongest muscles of the legs as well as the body weight to do the work. This is more efficient and will not tire the worker as quickly.

- Ask for help if the load is too heavy. If there is a very heavy bag of trash, ask someone to help rather than risk a lifetime back injury.

Figure 1.4 - Lifting Heavy Objects

Tips for Lifting Heavy Objects

- Place feet shoulder-width apart with *one slightly ahead of the other.*
- Move in close to the object being lifted.
- Bend at the hip and knees.
- Use upper arm and leg muscles to lift.
- Keep back straight while lifting.
- Straighten legs slowly while lifting.
- Lift smoothly without jerking.
- To turn, pivot the feet, do not twist body.

Unplug equipment when not in use. Throughout the workday the housekeeper will use equipment that requires electricity. When using electrical equipment, choose an outlet that will keep the cord out of traffic areas if at all possible. Caution passers-by to step over the cord carefully as necessary. When the equipment is not in use, including during breaks and lunch, unplug the equipment and coil the cord to avoid the risk of someone tripping.

Use caution when oxygen is in use. Oxygen itself is not flammable. Oxygen does, however, support combustion. Combustion means that a fire will burn better and faster if is supplied with oxygen. Following are some basic principles to remember when working around oxygen.

- Never light a match or lighter near an area when oxygen is in use.
- Avoid objects that cause friction or static. A spark can be enough to start a fire in a rich oxygen environment. Equipment should be functioning correctly so sparks are not produced.
- Use caution when cleaning near the oxygen tank to avoid pulling and disrupting the oxygen flow to the client.

Role of OSHA

The Occupational Safety and Health Act of 1970 created the Occupational Safety and Health Administration (OSHA) as a part of the United States Department of Labor. OSHA's mission is to save lives, prevent injuries, and protect the health of America's workers.

OSHA issued the **Bloodborne Pathogen Standard** in 1991 to protect workers at risk to diseases that are spread through the blood and select body fluids. Requirements resulting from the standard include the following:

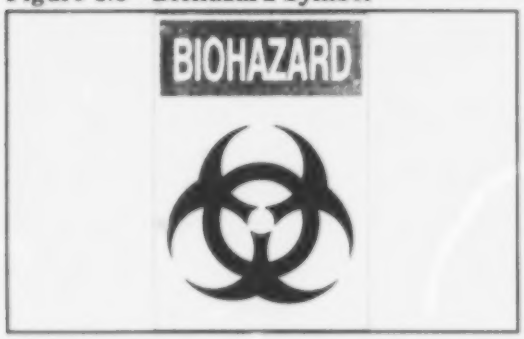
- An Exposure Control Plan - The **exposure control plan** gives detailed steps to be followed in the event that an employee has been contaminated by blood. If the housekeeper should accidentally get stuck by a contaminated needle or splashed in the face with blood, the exposure control plan would tell the employee what steps to follow.

- Compliance - Compliance is the facility's plan to protect employees from exposure to bloodborne pathogens. This will include how the facility will be designed to prevent exposure, what practices are expected of the employee to prevent exposure, what personal protective equipment should be used for each circumstance, housekeeping procedures to prevent contamination, cleaning and decontamination schedules, methods of decontamination, disposal of hazardous waste, and laundry procedures for contaminated linens.

- Communication of biohazards - Any containers that hold substances that are contaminated with blood or other

potentially infectious materials must be labeled with the biohazard symbol. Figure 1.5 is an example of the biohazard symbol. The symbol is fluorescent orange or orange-red with the lettering and symbols displayed in contrasting color. The facility is also required to provide information to the employee about bloodborne diseases.

Figure 1.5 - Biohazard Symbol



- Handling employee exposure incidents - This section of the standard describes facility responsibilities, department responsibilities, and record-keeping requirements.

The **Hazard Communication Standard** was also issued by OSHA to be sure all workers are informed of the risks of their work environment. This standard is known as the "Right-to-Know" law. It states that employees have a right to know about health hazards in the workplace and be informed how to protect themselves from those hazards. Each employer must develop a written hazard communication program and designate one person to coordinate this program. The hazard communication program should provide information to employees that will help protect them from injury or illness caused by contact with hazardous chemicals. The hazard communication program should include:

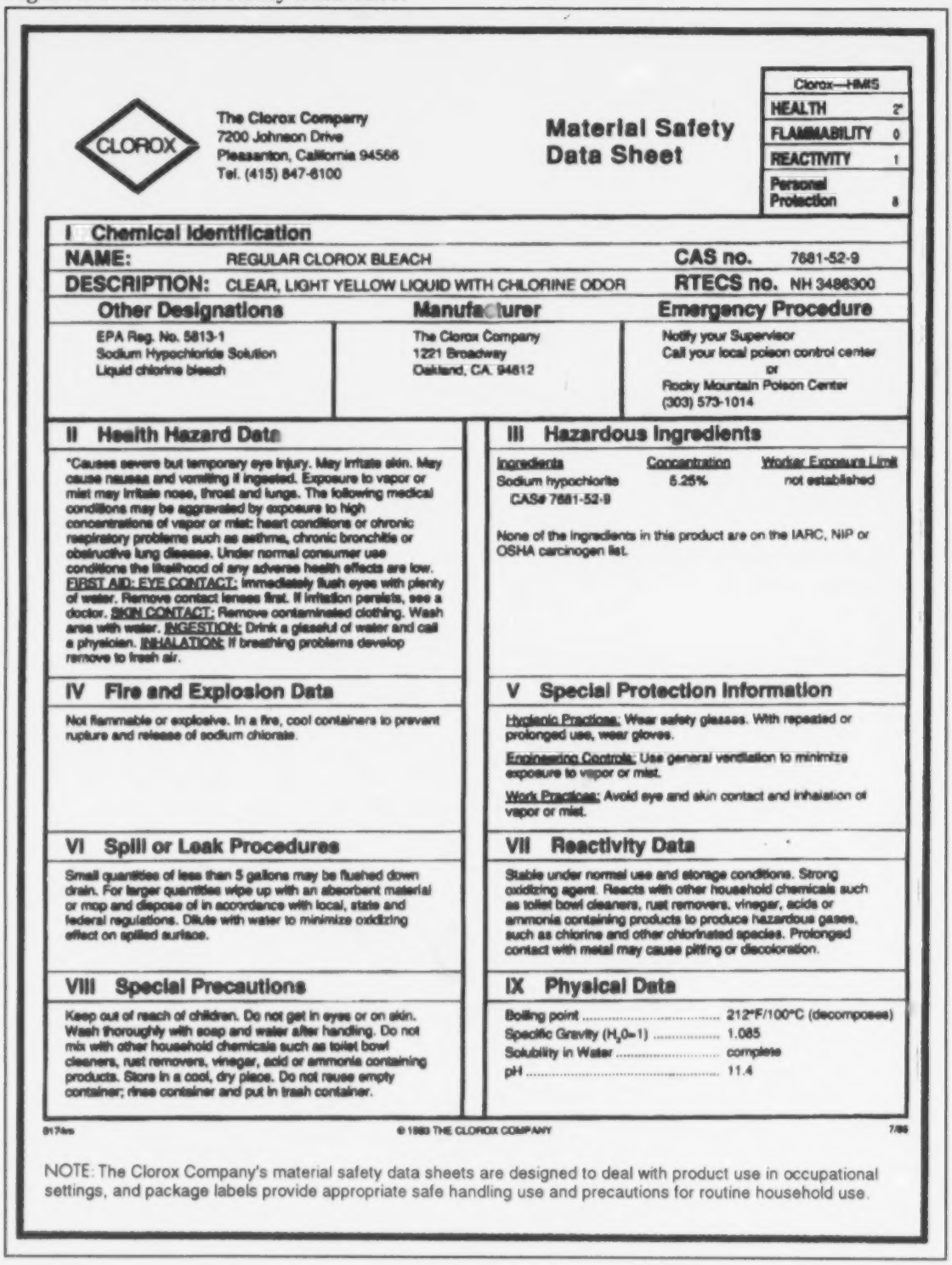
- A list of the hazardous chemicals used in the health care facility and an accompanying Material Safety Data Sheet (MSDS).
- Training to reduce the hazards of performing non-routine tasks. Special training regarding chemical hazards and safety precautions must be provided to employees.
- Protecting all employees from hazardous chemicals.
- Proper labeling methods for all hazardous chemicals. Chemicals removed from the original shipping container and placed in a secondary container must be labeled properly.
- Collecting and maintaining the Material Safety Data Sheets (MSDS).
- Training employees about hazardous chemicals.
- Protecting employees from chemicals whose formulas are kept secret because of patent laws.

Material Safety Data Sheets (MSDS)

The Hazard Communication Standard requires that employees be informed about the potential danger of the chemicals they work with. A **Material Safety Data Sheet** (MSDS) contains information about chemicals in the workplace, their hazards, first aid procedures, and spill cleanup. See Figure 1.6 for an example of a MSDS. The following information must be included on each MSDS.

- Section I: Product Identification - This section includes the chemical name, trade name, manufacturer's name, chemical formula, and emergency phone number.
- Section II: Ingredients - This section includes the ingredients, including

Figure 1.6 - Material Safety Data Sheet



The Clorox Company
7200 Johnson Drive
Pleasanton, California 94566
Tel. (415) 847-6100

Material Safety Data Sheet

Clorox—HMIS	
HEALTH	2*
FLAMMABILITY	0
REACTIVITY	1
Personal Protection	B

I Chemical Identification

NAME: REGULAR CLOROX BLEACH **CAS no.** 7681-52-9

DESCRIPTION: CLEAR, LIGHT YELLOW LIQUID WITH CHLORINE ODOR **RTECS no.** NH 3486300

Other Designations	Manufacturer	Emergency Procedure
EPA Reg. No. 5813-1 Sodium Hypochloride Solution Liquid chlorine bleach	The Clorox Company 1221 Broadway Oakland, CA. 94612	Notify your Supervisor Call your local poison control center or Rocky Mountain Poison Center (303) 573-1014

II Health Hazard Data

*Causes severe but temporary eye injury. May irritate skin. May cause nausea and vomiting if ingested. Exposure to vapor or mist may irritate nose, throat and lungs. The following medical conditions may be aggravated by exposure to high concentrations of vapor or mist: heart conditions or chronic respiratory problems such as asthma, chronic bronchitis or obstructive lung disease. Under normal consumer use conditions the likelihood of any adverse health effects are low. FIRST AID: EYE CONTACT: Immediately flush eyes with plenty of water. Remove contact lenses first. If irritation persists, see a doctor. SKIN CONTACT: Remove contaminated clothing. Wash area with water. INGESTION: Drink a glassful of water and call a physician. INHALATION: If breathing problems develop remove to fresh air.

III Hazardous Ingredients

Ingredients	Concentration	Worker Exposure Limit
Sodium hypochlorite CAS# 7681-52-9	5.25%	not established

None of the ingredients in this product are on the IARC, NIP or OSHA carcinogen list.

IV Fire and Explosion Data

Not flammable or explosive. In a fire, cool containers to prevent rupture and release of sodium chlorate.

V Special Protection Information

Hygienic Practices: Wear safety glasses. With repeated or prolonged use, wear gloves.

Engineering Controls: Use general ventilation to minimize exposure to vapor or mist.

Work Practices: Avoid eye and skin contact and inhalation of vapor or mist.

VI Spill or Leak Procedures

Small quantities of less than 5 gallons may be flushed down drain. For larger quantities wipe up with an absorbent material or mop and dispose of in accordance with local, state and federal regulations. Dilute with water to minimize oxidizing effect on spilled surface.

VII Reactivity Data

Stable under normal use and storage conditions. Strong oxidizing agent. Reacts with other household chemicals such as toilet bowl cleaners, rust removers, vinegar, acids or ammonia containing products to produce hazardous gases, such as chlorine and other chlorinated species. Prolonged contact with metal may cause pitting or discoloration.

VIII Special Precautions

Keep out of reach of children. Do not get in eyes or on skin. Wash thoroughly with soap and water after handling. Do not mix with other household chemicals such as toilet bowl cleaners, rust removers, vinegar, acid or ammonia containing products. Store in a cool, dry place. Do not reuse empty container; rinse container and put in trash container.

IX Physical Data

Boiling point	212°F/100°C (decomposes)
Specific Gravity (H_2O=1)	1.085
Solubility in Water	complete
pH	11.4

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NOTE: The Clorox Company's material safety data sheets are designed to deal with product use in occupational settings, and package labels provide appropriate safe handling use and precautions for routine household use.

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those substances that have been defined as hazardous.

- Section III: Physical Data - This section has very technical data about the chemistry of the product.
- Section IV: Fire and Explosion Hazard Data - This section explains the product will burn or explode, how to extinguish a fire caused by a particular chemical, and any special considerations when fighting a fire with this chemical involved (for example, if the chemical gives off a toxic gas as it burns), and any unusual fire or explosion hazards.
- Section V: Reactivity Data - This section includes information about whether this chemical will react if combined with other chemicals.
- Section VI: Health Hazard Data - This section includes information about the possible effects of overexposure to a chemical.
- Section VII: Emergency and First Aid Procedures - This section discusses first aid procedures for accidental inhalation, ingestion, or contamination.
- Section VIII: Special Protection Information - This section includes information about personal protection equipment required when working with the chemical.
- Section IX: Spill or Leak Procedures - The section includes information about how to clean up a spill.
- Section X: Storage and Handling - This section outlines safe and appropriate storage and handling of the chemical.

It is not necessary for the housekeeper to memorize the MSDS of every chemical they work with every day. However, it is important to know the location of the MSDS and to understand the information included on a MSDS. For example, the housekeeper has been called to a nursing unit to clean up a chemical spill. If the housekeeper is not familiar with the chemical, he or she should locate the MSDS book for the unit, look up the chemical, and obtain information about the procedure for cleaning up the chemical spill.

Radiation Safety

The amount of potential radiation hazard within a health care facility will vary. The potential radiation hazard in a large health sciences center where research, diagnosis, and treatment using radiation takes place is much greater than in a small, long-term care facility. In smaller facilities, most residents leave the facility for x-rays and other treatments that might involve exposure to radiation. As a result, radiation exposure is less likely.

Radiation sources include x-ray machines, electron microscopes, lasers, and microwave ovens. Some clients are treated with radioactive isotopes and research laboratories use radioactive isotopes. The housekeeper will generally have a very low potential for exposure to radiation. Caution signs warn the housekeeper if he or she is entering an area where there is a radiation source. See Figure 1.7 for an example of a radiation warning sign.

Figure 1.7 - Radiation Symbol

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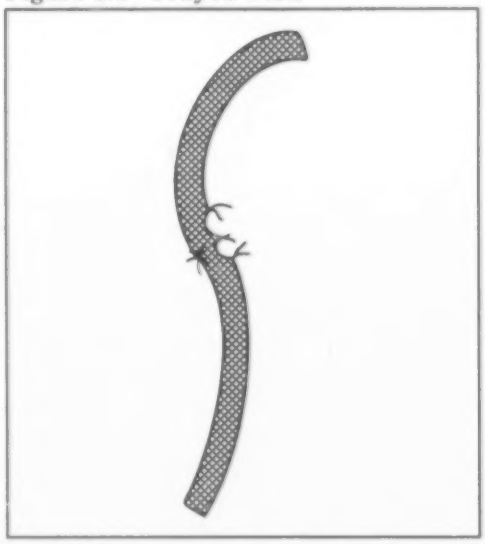
The housekeeper working on a general client unit will have very little exposure to radiation sources. The most common exposure would be the unit on the radiology department or in the operating room using a portable x-ray machine. To minimize exposure simply leave the room when the x-ray is being taken. Occasionally, a client will be treated for an illness using radioactive isotopes. Warning signs will be placed on the doors and special precautions are taken for disposing of trash from these rooms. Special training will be provided to housekeepers who will be working in laboratories using radioactive isotopes or in the radiology department.

Electrical Safety

Electricity can be very dangerous and should always be handled with caution. It can result in fires, shock, explosions, or burns. Proper use of electricity is often taken for granted because it is used so commonly. A housekeeper can receive an electrical shock when he or she becomes part of an electrical circuit. The following safety tips should be observed when working with electrical equipment.

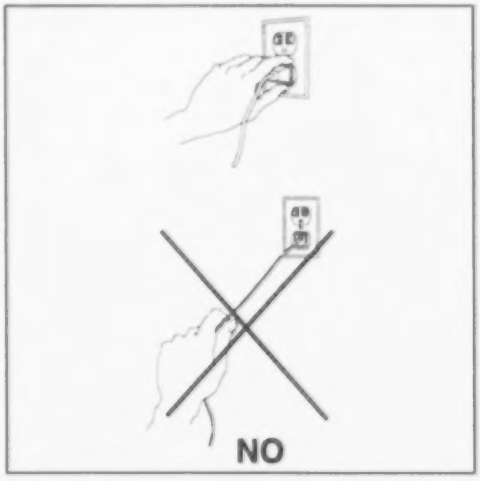
- Do not use electrical equipment around water. Water is a conductor of electricity. Do not allow a cord to run across a sink or a wet floor. If the equipment is not in good working order, water can conduct the electrical current to the user resulting in an electrical shock. Discontinue use and report any electrical shock that occurs when using equipment.
- Cords should have three prong plugs to work effectively. Do not use a cord if the grounding prong has been removed.
- Never use a power cord that is frayed as in Figure 1.8. When the cord on electrical equipment is frayed, the insulation is no longer present to protect the user from injury. Tag the equipment and send it to the proper department for repair.

Figure 1.8 - Frayed Cord



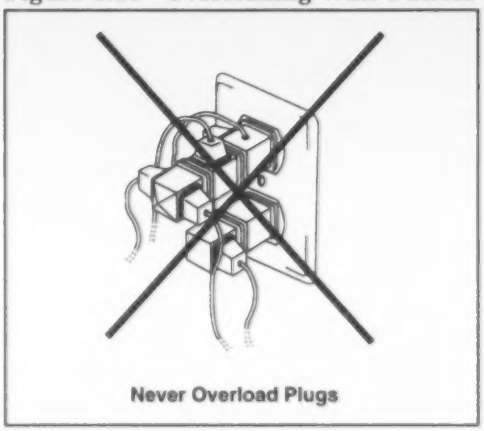
- Grasp the plug of an electrical cord to remove it from the socket, never pull the cord as shown in Figure 1.9.

Figure 1.9 - Unplugging an Electrical Cord



- Never overload too many electrical plugs into a wall outlet as shown in Figure 1.10. This can cause damage to the equipment or blow a fuse.

Figure 1.10 - Overloading Wall Outlets

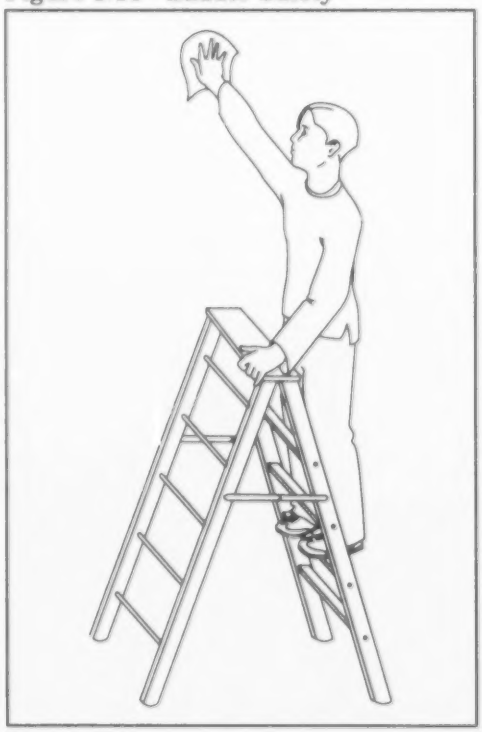


Safety When Using a Ladder

The housekeeper will need to use a ladder on occasion to clean the upper parts of rooms, change light bulbs, or dust high furniture or equipment. Falls from ladders can cause severe injuries. Observe the following safety tips when using ladders.

- Place the ladder on a firm level surface.
- Never stand on the top step of a step ladder.
- Place the ladder close to the object you are trying to reach. Do not reach a long distance. This can result in a shift of the weight and cause the ladder to tip. (See Figure 1.11.)

Figure 1.11 - Ladder Safety



Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: Safe Work Environment

Activity Sheet

1. List four ways the housekeeper can maintain a safe work environment for self and others.

   a. _____

   b. _____

   c. _____

   d. _____

2. Define the term body mechanics.

   _____

3. List six basic principles of good body mechanics.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

   f. _____

4. What does OSHA stand for?

   _____

5. OSHA has issued two standards that are particularly important to worker safety . Name the two standards.

   a. _____

   b. _____

6. Define the Bloodborne Pathogen Standard.

_____

_____

_____

_____

7. Define the Hazard Communication Standard.

_____

_____

_____

_____

8. MSDS stands for _____ _____ _____ _____.

9. What information can be found on the MSDS?

a. _____

b. _____

c. _____

d. _____

e. _____

f. _____

g. _____

h. _____

i. _____

j. _____

10. Explain places the housekeeper might encounter the radiation symbol and what safety precautions should be taken.

_____

_____

_____

_____

11. What basic principles should be used to avoid an electrical hazard.

a. _____

b. _____

c. _____

d. _____

e. _____

12. List three principles of ladder safety.

a. _____

b. _____

c. _____

Clinical/Laboratory Activities

1. Interview the person responsible for keeping track of safety and accidents in the health care facility. Ask the following questions.

   a. What is the most frequent accident that occurs within the housekeeping staff?

   _____

   b. What has the facility done to try to reduce the number of accidents of this type?

   _____

c. What safety training is required in this health care facility annually?

_____

d. Who is responsible in this facility for the OSHA Hazard Communication Program?

_____

e. Where are the MSDS sheets located?

_____

2. Ask the housekeeping supervisor the names of three common chemicals used by housekeeping staff on a regular basis. Read the MSDS on these chemicals. Share with your instructor what you learned about the use of these chemicals.

Lesson 2:
Working With Cleaning Chemicals

Objectives:

A. Identify cleaning chemicals commonly used by housekeepers.

B. Use cleaning chemicals according to label directions.

C. Store chemicals appropriately.

D. Label secondary cleaning container.

E. Select appropriate personal protective equipment when using cleaning chemicals.

Key Terms:

- Disinfectant
- Broad spectrum
- Germicide
- Concentrated cleaner
- Secondary container
- Topping off

Cleaning chemicals break down dirt, dissolve dirt, trap dust, or kill microorganisms. Housekeepers are exposed to hazards when working with chemicals. A few basic rules for handling chemicals can make the housekeepers job safe.

Select Appropriate Cleaning Chemicals

Cleaning chemicals will be used for many purposes such as dusting, cleaning floors, disinfecting sinks and toilets, washing walls, and cleaning up spills. It is important that the housekeeper select the correct cleaning chemical for the job. The following categories of cleaning chemicals will be used by the housekeeper on a regular basis.

Window cleaner - Ammonia is the main ingredient in window cleaning products. These products are used to clean windows, mirrors, and other glass in the facility.

Toilet bowl cleaner - Some cleaners may contain a mild acid. The housekeeper should be very cautious when using these cleaners. A splash can burn the skin, damage carpet or other floor covering, or ruin the floor finish. Avoid contact with metal surfaces since the cleaner may damage the metal.

Disinfectant - This product is used to disinfect surfaces such as countertops, bedside tables, overbed tables, sinks, and hard floors. A **disinfectant** is a chemical that will kill most microorganisms, but it does not sterilize the surfaces. To be sterile, a surface or object must be completely free of all microorganisms and spores. These chemicals are usually broad spectrum germicides. **Broad spectrum** means the chemical will kill most types of microorganisms. **Germicide** means to kill microorganisms.

All purpose cleaners - These cleaners are used for many purposes throughout the health care facility. The main difference between an all purpose cleaner and a disinfectant is that the all purpose cleaner may not kill microorganisms. Read the label directions and follow the facility policy for the kinds of surfaces these cleaners may be used on.

Wood cleaners and furniture polish - A wood cleaner is used to clean and condition wood

surfaces such as wood doors, hand railing, or furniture. A wood conditioner makes the wood surface look nice, but also helps keep the wood from drying out. Furniture polish traps dust and polishes the wood surface.

Carpet cleaners - These cleaners are used to clean soil from carpet surfaces.

Hand soap - These types of cleaners are placed in dispensing containers. Most facilities use a prepackaged system so the housekeeper will not come into contact with the soap. The prepackaged system is considered a better aseptic technique because the refill system results in a growth of microorganisms in the container. No special precautions need to be taken when working with hand soap refills.

Using Cleaning Chemicals

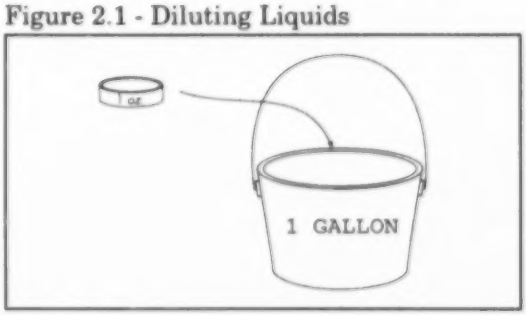
Once the correct cleaning chemical has been selected, it is important to follow the label directions exactly. The label on the bottle will include the name of the chemical, the appropriate uses, directions for proper dilution if it is a concentrated cleaner, precautions for working with the chemical, and what to do if there is an accidental splash or spill.

The label tells what this chemical can be used to clean. Use the chemical only on surfaces that have been listed on the label. Use on other types of surfaces could result in damage.

A **concentrated cleaner** is very strong and must be diluted to work properly and safely. When using cleaning solutions, more is not better. Cleaning chemicals must be in the proper dilution ratio to clean correctly. Too little or too much can cause the chemical to not work properly. A cleaning chemical that is too strong could cause damage to the surface or injury to the worker because of strong fumes or the chemical may eat through the protective gloves.

Follow the label directions to find out how much cleaner should be used with the diluting solution. Typically the diluting solution will be water, but other liquids might also be used. It is important that the dilution rate on the label is followed. For example, if the label directions say to add 1 ounce cleaner for every 1 gallon of water, the housekeeper would measure 1 gallon of water and place it into a second container This is called a **secondary container** because it contains the chemical in the proper dilution. The next step is to add 1 ounce of the cleaner to the secondary container.

Figure 2.1 - Diluting Liquids



The term "**topping off**" may be heard and means to add additional chemical concentrate to a secondary container when it is not quite empty. THIS PROCEDURE SHOULD NOT BE DONE. The container should be emptied first and the process started over.

Safety precautions must always be taken when working with chemicals. Observe the following safety precautions.

- Mix chemicals with rubber gloves to avoid contact with the skin.

- Wear goggles or a mask with an eye shield when mixing chemicals to prevent accidental splashing of the chemical into the eyes.
- ALWAYS FOLLOW LABEL DIRECTIONS.
- Add the concentrated chemical to the diluting solution rather than the diluting solution to the concentrated chemical.

Many facilities use a dispensing system for their housekeeping chemical products. The dispensing systems are simple to use and assure the correct dilution of concentrate and solution. The housekeeper selects a clean, properly labeled secondary bottle, places it into the dispensing system, and fills the bottle. The system manufacturer provides a stick-on secondary label to attach to the secondary bottle. The label must meet labeling requirements.

Storing Chemicals

Cleaning products used by the housekeeper contain hazardous chemicals. It is essential that the cleaning products are stored safely. Cleaning chemicals are placed in locked cabinets on the housekeeper cart to prevent a passerby from taking them. In a long-term care facility, many residents are confused. A resident may think the cleaning chemical is water or beverage to drink. In a hospital, especially on the pediatric unit, a child may take a cleaning chemical and accidentally spill it and cause injury.

When storing cleaning chemicals in a storage closet, the door should be locked. Do not leave the room with the door open, even for a short time. Cleaning chemicals should never be placed in the same area as foods or medications.

Labeling Secondary Containers

A label must be attached to the secondary container anytime a cleaning chemical is removed from its original container or diluted and put into a secondary container. OSHA requires that certain minimum information must be included on the secondary label. Information that must be included is the name of the chemical, directions for use, cautions, and the hazard rating.

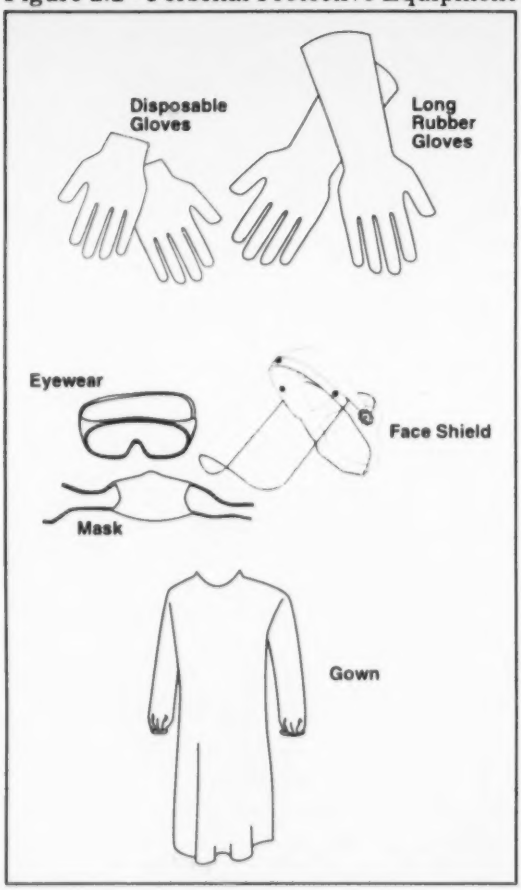
When a health care facility is using a dispensing system, secondary labels that have all the required information are provided. If no label is provided, a handwritten label must be prepared and attached to the secondary container. Labels on secondary containers that are reused should be replaced if spills on the outside of the container caused the label to be unreadable.

Personal Protective Equipment (PPE)

Always wear gloves when working with chemicals. The MSDS or the label on the container will indicate whether nonsterile vinyl or latex gloves are adequate or whether heavier, reusable rubber gloves should be used. When diluting chemicals from a concentrate, always wear gloves, mask, gown, and face shield or goggles to reduce the chance of splash on the face or mucous membranes. Refer to Figure 2.2 on page 18 for examples of personal protective equipment.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Figure 2.2 - Personal Protective Equipment



Lesson 2: Working with Cleaning Chemicals

Activity Sheet

1. Name five commonly used types of chemical and what they are used for.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

2. Describe why it is important to use cleaning chemicals as the label directs.

   _____

   _____

3. List the steps you would follow to dilute the following concentrated all-purpose cleaning chemical. Include selecting proper Personal Protective Equipment.

   a. _____

   _____

   _____

   b. _____

   _____

   _____

   c. _____

   _____

   _____

All-Purpose Cleaner

For cleaning hard surfaces such as woodwork, walls, appliances, counters, and floors.

Directions: Use one ounce of All-Purpose Cleaner per gallon of hot water.

Caution: Contains Primary Alcohol Alkoxylate. In case of eye contact, flush with running water for 15 minutes. Call a Poison Control Information Center or a physician.

KEEP OUT OF REACH OF CHILDREN.

4. Cleaning chemicals should always be stored in a _____ cabinet, storage area, or room. Why?

_____

_____

5. What information must be on the label of a secondary cleaning container?

_____

_____

_____

_____

6. Always wear _____ when working with cleaning chemicals?

7. Always wear _____ if there is danger of splashing when using a cleaning chemical.

Clinical/Laboratory Activities

1. Ask the housekeeping supervisor to show you where the cleaning chemicals are stored. Under supervision, list the chemicals used in this particular facility. Include how the chemical is used. Turn this list in to your instructor.

2. Ask the housekeeping supervisor to explain the information needed on the label of a secondary container. Prepare a handwritten label for a secondary container and turn it in to your instructor.

Lesson 3:
Infection Control

Objectives:

A. Explain the difference between the Category System of Isolation Precautions, Universal Precautions, Body Substance Isolation, and current Guidelines for Isolation Precautions in Hospitals.

B. Identify general principles of standard and transmission-based precautions.

C. Select appropriate Personal Protective Equipment to prevent the spread of infections.

D. Use standard and transmission-based precautions appropriately.

E. Match the precautionary signs or symbols to their meaning.

F. Transport and dispose of infectious hazardous waste appropriately.

Key Terms:

- Virulent
- Infectious disease
- Category system of isolation precautions
- Universal Precautions
- Body Substance Isolation
- Personal protective equipment
- Standard Precautions
- Transmission-based Precautions
- Airborne precautions
- Droplet precautions
- Contact precautions
- Sharps box

A primary purpose of the housekeeping department is to reduce the number and the spread of microorganisms. The micro-organisms in health care settings are virulent. **Virulent** means extremely hard to kill. Microorganisms in health care settings can cause disease easily. It is essential that the housekeeper practice cleaning techniques that will reduce the number of microorganisms and prevent their spread throughout the facility. This lesson will discuss how to prevent the spread of infection and the different categories of isolation procedures.

History of Isolation Precautions

Management and control of microorganisms change as more information becomes available about how they are spread. Guideline recommendations as early as 1877 recommended that patients with infectious diseases should be put in separate hospitals. An **infectious disease** is the result of microorganisms that spread to other people. Many guidelines have been published over the years and isolation precautions have resulted in four categories: 1) Category System of Isolation Precautions, 2) Universal Precautions, 3) Body Substance Isolation, and 4) Standard Precautions.

The **Category System of Isolation Precautions**were used only after a patient had been diagnosed with an infectious disease. This was the first published guideline and it had seven isolation categories: strict isolation, respiratory isolation, protective isolation, enteric precautions, wound and skin precautions, discharge precautions, and blood precautions. Cards were placed outside patient rooms to indicate what precautions should be used before entering and leaving that particular room. This system resulted

in over isolation of some patients. Even though this system is not commonly practiced, the housekeeper might see this type of isolation system on occasion.

Universal Precautions were introduced with an emphasis on applying blood and body fluid precautions to all blood and body fluids potentially infected with a blood-borne pathogene regardless of diagnosis. Universal Precautions taught use of gloves and gowns. It expanded to the use of masks and eye protection to prevent exposure by splashing of blood. The category system of isolation was still used for diseases spread by routes other than bloodborne pathogens.

Body Substance Isolation (BSI) focuses on the isolation of all moist and potentially infectious body substances from all patients, regardless of their infection status. BSI includes body substances such as blood, feces, urine, sputum, saliva, wound drainage, and other body fluids. BSI takes precautions even if the patient has not been diagnosed with an infectious disease. An alert sign is posted outside the room to instruct those entering to check with the floor nurse first. The nurse would determine whether a mask should be worn in the room of a patient with infections transmitted by the airborne route.

The most recent isolation guideline is the Guidelines for Isolation Precautions in Hospitals. This guideline includes standard precautions and transmission-based precautions. It integrates the previous isolation precautions and includes guidelines designed to prevent the spread of pathogens by airborne or droplet transmission or by contact with dry skin or contaminated surfaces. This guideline will be explained in more detail in the next section.

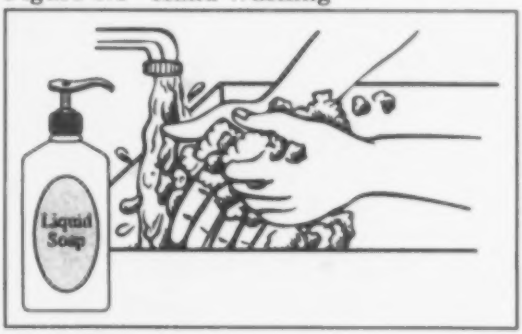
Standard and Transmission-based Precautions

Standard precautions are designed for the care of all patients regardless of their diagnosis or infection status. Standard precautions include two basic principles.

- Precautions are taken with all clients, whether or not an infectious disease has been diagnosed. This principle is important because a client could infect staff or be spread within the facility before a final diagnosis has been made.
- Precautions are taken with all blood, body fluids, secretions and excretions (except sweat), non-intact skin, and mucous membranes. Disease producing microorganisms can be present and spread through any of these fluids or tissues.

Hand washing remains the number one way to prevent the spread of infection. The procedure for hand washing is discussed in the *Health Care Assistant Core* curriculum and should be reviewed. The housekeeper should remember to wash his or her hands at the following times: before putting on gloves, after gloves are removed, after using the toilet, and after eating. If you should accidentally touch blood or body fluids without gloves, wash your hands immediately. Figure 3.1 shows the proper hand washing techniques.

Figure 3.1 - Hand Washing



Gloves, mask, protective eyeware, and gowns are **personal protective equipment** (PPE) used to act as barriers from contact with or spread of infectious microorganisms.

Gloves are worn to prevent blood and body fluids from contaminating the health care worker's hands, to prevent organisms on the health care worker's hands from contaminating the client, and to prevent the transmission of organisms from client to client. The procedure for putting on and removing daily-care, nonsterile gloves is outlined in the *Health Care Assistant Core* curriculum and should be reviewed.

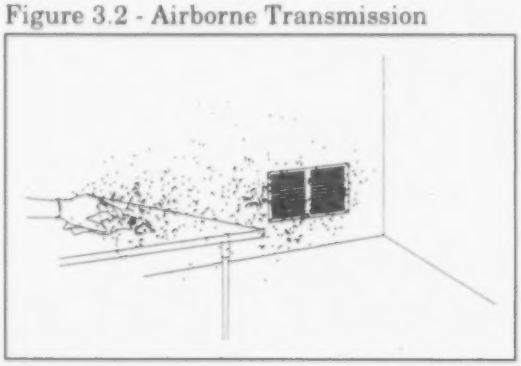
Gloves should be worn by the housekeeper before touching any blood, body fluids, secretions, excretions or contaminated items. For example, the housekeeper should put gloves on to clean a spill of urine, blood, feces, or other body substance. Gloves are also worn when handling trash. If the worker does not change gloves at the appropriate time, microorganisms might be spread from one client to another. Gloves must also be taken off before touching uncontaminated items and environmental surfaces.

Mask and eye protection should be worn to protect the mucous membranes, eyes, nose, and mouth during procedures that can cause splashes or sprays of blood, body fluids, secretions, and excretions. A clean, housekeeping gown should be worn to protect the skin and clothing of the housekeeper where contamination by blood, body fluids, secretions, or excretions is possible. For example, the housekeeper may be cleaning in the trauma room of the Emergency Room after a particularly bloody case where it would be possible to get blood on the uniform. Review the procedure for putting on and removing masks and gowns as outlined in the *Health Care Assistant Core* curriculum.

Transmission-based precautions are designed for clients who are known to be infected or are suspected of having a highly infectious diseases. *These guidelines are additional precautions to the Standard Precautions.* Transmission-based precautions include airborne precautions, droplet precautions, and contact precautions.

Airborne precautions are used when the infectious agent is carried in the air and can be inhaled. Figure 3.2 shows how dust particles containing microorganisms can spread through air vents. Airborne precautions would be used for tuberculosis. The client diagnosed or suspected of having an infectious disease that is spread through the air would be placed in a private room or in a room with a client who has the same disease. A surgical mask is worn upon entering the room. The client should not be out of the room and should not be transported to other parts of the facility unless absolutely necessary.

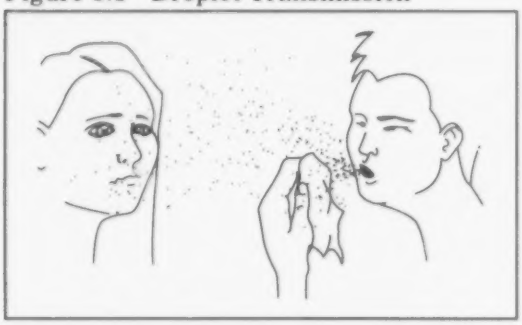
Figure 3.2 - Airborne Transmission



Droplet precautions are used when the infectious agent is transmitted in droplets (sneezing or coughing) to the mucous membranes of another person, as shown in Figure 3.3. Droplet precautions would be used for pneumonia and influenza. The

client diagnosed with or is suspected of having an infectious disease that is spread by the droplet route would be placed in a private room or in a room with a client that has the same disease. The client should not be out of the room and would not be transported to other parts of the facility unless absolutely necessary.

Figure 3.3 - Droplet Transmission

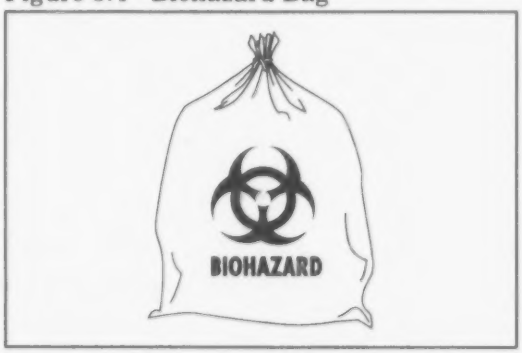


Contact precautions are used when a client is diagnosed with or is suspected of having an infectious disease that is spread by contact with dry skin or contaminated surfaces. The client should be placed in a private room or in a room with a client who has the same infectious disease. Gloves should be worn when entering the room and changed after every contact with infectious material. Gloves are removed before exiting the client's room. Gowns are worn when entering the room if there is potential risk of contact between clothing and the client, environmental surfaces, or items in the client's room. The gown is removed before leaving the client's room. The client should be in the room at all times unless transport to another part of the facility is necessary. Equipment from this client should not be shared with other clients.

Precautionary Signs and Symbols

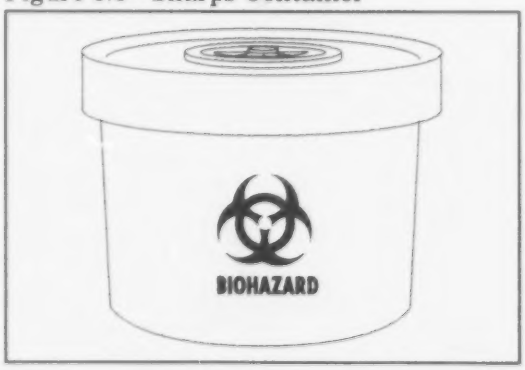
OSHA's Bloodborne Pathogens Standard requires that all containers that contain blood or other potentially infectious material be labeled with the biohazard symbol. The housekeeper may see this symbol on the side of a bag that contains linens soiled with blood, urine, or feces. Refer to Figure 3.4. Dressing that is contaminated with blood and other drainage are also placed in a biohazard bag for disposal. Standard Precautions should be taken when transporting these bags for proper disposal or laundry.

Figure 3.4 - Biohazard Bag



The biohazard symbol will also be seen on sharps boxes that are in client rooms, exam rooms, or medication rooms. A **sharps box** is a container that needles cannot poke through. It is used to place contaminated needles, scalpel blades, razor blades, and other disposable sharp instruments. Refer to Figure 3.5. The housekeeper may be responsible for disposing of full sharps boxes. These boxes are sealed and taken to

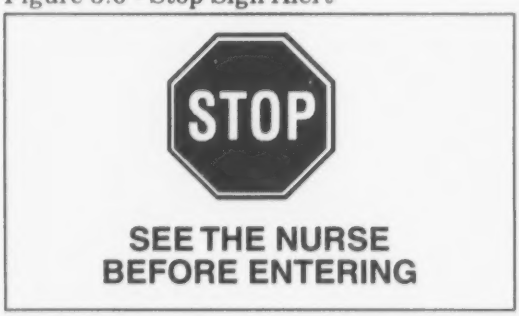
Figure 3.5 - Sharps Container



the proper area of the health care facility for disposal.

The housekeeper may also see a "Stop Sign Alert" sign on the outside of a client's room. See Figure 3.6 for an example of this sign. This sign tells the housekeeper to check with the nursing staff to determine what type of isolation precautions should be used before entering the room to clean or empty trash.

Figure 3.6 - Stop Sign Alert



Transport and Disposal of Infectious Hazardous Waste

Any bag or box that has the biohazard label on it contains some type of hazardous waste. These substances must be disposed of using special methods to avoid contaminating the environment.

When transporting bags of soiled linens to the laundry for cleaning, the bag must be tightly closed. No evidence of blood or body fluid should be on the outside. The nursing staff is responsible for seeing that no hazardous substance is on the outside of the bag. Place the soiled linen in a biohazard bag in laundry room.

When transporting boxes, bags, or sharps containers with the biohazard label, be sure each is securely closed with no apparent contamination on the outside. Place these containers in the proper location designated by the health care facility.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 3: Infection Control

Activity Sheet

1. Define the following terms:

   a. virulent: _____

   b. infectious disease: _____

2. Describe the main difference between the Category System of Isolation and Universal Precautions.

   _____

   _____

3. Discuss the difference between Body Substance Isolation and Standard Precautions/Transmission Precautions.

   _____

   _____

4. Match the following types of infection control procedures in Column B with the description in Column A. Some may have two answers.

Column A		Column B
a. ____	Only isolates patients after diagnosis of an infectious disease	A. Category System of Isolation
b. ____	Focuses on using PPE for all patients and all body fluids and mucous membranes	B. Universal Precautions
c. ____	Focuses only on blood and body fluids that might carry a bloodborne pathogen	C. Body Substance Isolation
d. ____	Focuses on infectious diseases that might be spread by the airborne, droplet, or contact dried secretions	D. Standard Precautions
		E. Transmission Based Precautions

5. List times when gloves should be worn by the housekeeper to prevent the spread of an infectious disease.

_____

_____

_____

6. List times when a gown should be worn by the housekeeper to prevent the spread of an infectious disease.

_____

_____

_____

7. List times when a mask with face shield or goggles should be worn by the housekeeper to prevent the spread of an infectious disease.

_____

_____

_____

8. What is this sign called?

SEE THE NURSE
BEFORE ENTERING

a. _____

What does it mean?

b. _____

9. What is this sign called?

a. _____

What does it mean?

b. _____

Clinical/Laboratory Activities

1. Talk with the housekeeping supervisor. Ask him or her how infectious hazardous waste is disposed of in your clinical site.

   _____

   _____

2. Ask the housekeeping supervisor what system of infection control is used in your clinical site.

   _____

   _____

3. Tour the health care facility. List every time you see the biohazard sign. Turn in the list to your instructor.

Lesson 4:
Preventing and Responding to Emergencies

Objectives:

A. Identify the housekeeper's role in emergencies and disasters.

B. Report suspicious situations.

C. Discuss the importance of name badges and security on the job.

All staff members are responsible for the safety of the clients during their stay in a health care facility. Facilities must be prepared for fire, severe weather, earthquake, bomb threats, and local disasters. Emergency drills are held on a regular basis to be sure everyone knows what to do in an emergency. The exact responsibilities of the housekeeper will vary from facility to facility. It is important that the housekeeper know the policy for each type of emergency and learn the duties outlined. This lesson will outline basic procedures for the housekeeper in an emergency.

Housekeeper's Role

Fire drills are one of the most common drills conducted in health care facilities. The housekeeper should know where the fire alarms and fire extinguishers are in the area where he or she works regularly. Directions will typically be given to the housekeeper from a housekeeping supervisor or nursing staff on the unit. A housekeeper who discovers a fire should know the basic steps to follow just as any other member of the staff. "RACE" is an easy way to remember what to do if a fire occurs.

R = Rescue: Rapidly remove persons in immediate danger to an area of safety.

A = Alarm: Activate the nearest fire alarm pull station.

C = Confine:

- Prevent the spread of the fire and smoke by closing all doors.
- Return with a fire extinguisher to the room where the fire was found. Feel the outside of the door. If the door is hot, this indicates the fire has spread. DO NOT OPEN THE DOOR!

E = Extinguish: Use an appropriate fire extinguisher to extinguish the fire. Review the types of fire extinguishers discussed in the *Health Care Assistant Core* curriculum.

Another type of emergency the housekeeper may need to respond to is a severe weather alert. A severe weather "watch" means the conditions are favorable for an onset of violent wind, rain, hail, or a tornado. A "warning" means severe weather is occurring in the area and to immediately move to safety. The usual response to a severe weather warning is to move clients to the hallway whenever possible. The housekeeper may be asked to assist by moving chairs into the hallway, by escorting ambulatory clients to the chairs, and to assist in distributing blankets to those clients remaining in their rooms. For those clients who cannot be moved into a hallway, pull the curtain around them and give them blankets and pillows to protect themselves from broken glass or flying debris. The housekeeper should then find a safe area and remain there until an "all clear" has been announced. At this time the

housekeeper would assist in returning clients to their rooms.

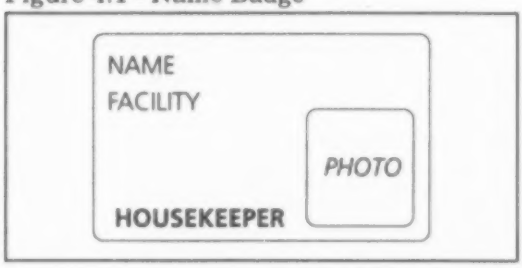
Another type of emergency is the bomb threat. The housekeeper may again be asked to assist in evacuating clients if necessary. Be aware of any suspicious or unusual looking objects or activity and report it to the appropriate staff personnel. Follow the facility guidelines for bomb threat emergencies.

Disaster emergencies in the community may occur. This could be a multi-vehicle traffic accident, a fire, or tornado with the potential for injury of many people. Health care facilities have disaster drills twice a year to prepare all the staff for their responsibilities. All staff in the health facility are usually called in to help. The housekeeper will be needed to assist in keeping supplies stocked and to assist in cleaning for the next client. Become familiar with the policy manual for the specific facility.

Security Issues

Health care facilities require staff to wear name badges so clients can easily identify people who care for them. Name badges also help to identify anyone who is not supposed to be in the facility or near the clients. Many facilities use name badges with pictures so it is easy to tell if a stranger is using someone else's name badge. The name badge is a part of the uniform and should be worn daily. Figure 4.1 is an example of what a name badge looks like.

Figure 4.1 - Name Badge



The housekeeper should also be aware of the people in the area where he or she is working. In a small facility the housekeeper will probably know most of the staff and will often become familiar with the visitors. It will be more obvious when a stranger is present in these situations. If the housekeeper sees a person who looks confused, the housekeeper should ask if he or she needs help to find something or someone. If the stranger looks suspicious, has a weapon of any sort, or acts in a violent way, contact security immediately. In small facilities where security is not present at all times, 911 will reach emergency help in most places. If the 911 system is not available, the housekeeper should become familiar with the local emergency number.

Another important safety practice is making sure doors that should be locked remain locked. Unlocked doors can serve as an entry way for strangers. Unlocked doors may also allow a confused client to leave the facility unattended. Clients "escaping" from health care facilities may result in injury or even death. Never prop a door open or turn off alarms designed to warn staff that a client is exiting a door.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written evaluation for this unit. A score of at least 80 percent indicates you may proceed to the next unit.

Lesson 4: Preventing and Responding to Emergencies

Activity Sheet

1. Write what the word "RACE" means regarding fire safety.

   a. R _____

   b. A _____

   c. C _____

   d. E _____

2. Write the usual responsibilities of the housekeeper in the following emergencies?

   a. Fire: _____

   b. Severe Weather Warning: _____

   c. Bomb Threat: _____

3. Why is it important to wear your name badge?

   _____

   _____

4. What should the housekeeper do if a suspicious looking person is noticed in the health care facility?

   _____

   _____

5. Why is it important to keep doors that are intended to be locked in the locked position?

   _____

   _____

Clinical/Laboratory Activities

1. Locate the Procedure Manual and write the responsibilities of the housekeeper in fire, severe weather, disaster, and bomb threat. Turn your paper in to the instructor and discuss what you found out about your role.

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: Safe Work Environment Rating _____

Comments: _____

_____

Activity Sheet: Working with Cleaning Chemicals Rating _____

Comments: _____

_____

Activity Sheet: Infection Control Rating _____

Comments: _____

_____

Activity Sheet: Preventing and Responding to Emergencies Rating _____

Comments: _____

_____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Unit IV

General Cleaning Procedures

To maintain the health care environment effectively, the housekeeper must know how to use the equipment and maintain it in good working order. The first lesson discusses commonly used pieces of equipment and the procedures to use and maintain them.

There are a number of routine cleaning tasks that the housekeeper will be asked to do on a daily basis. The second lesson contains the steps of procedure for common cleaning tasks.

Floor care is an important part of the housekeeper's job. The third lesson will describe how to clean hard floor surfaces and carpeted surfaces.

Unit Lessons

Housekeeping Equipment

Routine Cleaning Tasks

Floor Cleaning

Lesson 1:
Housekeeping Equipment

Objectives:

A. Identify equipment used in housekeeping.

B. Discuss the importance of daily preventive maintenance.

C. Identify when housekeeping equipment needs to be disinfected.

D. Operate equipment appropriately.

Key Terms:

- Wet/Dry vacuum
- Wringer

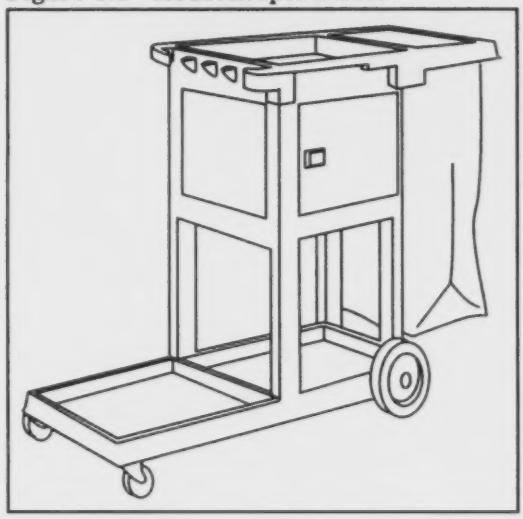
The housekeeper will use several pieces of equipment every day. It is important that the housekeeper understand how to use the equipment correctly, maintain the equipment in good working order, and observe and report any equipment malfunction.

Equipment

Equipment used by the housekeeper includes the housekeeper's cart, vacuum cleaner, dust mop, wet mop, and the mop bucket with a wringer. Other equipment may include the wet/dry vacuum and the standard floor machine.

The housekeeper's cart is a tool the housekeeper uses to organize the cleaning equipment needed daily. Figure 1.1 is an example of a cart. The cart is on rolling casters to allow the housekeeper to keep cleaning supplies near the work area. Each facility may have a slightly different style of housekeeper's cart; however, each cart will have similar characteristics. The top tray of the cart is generally open. The supplies the housekeeper uses to restock, such as paper towels, toilet paper, trash bags, and soap dispenser refills are readily available. The cart will have a locking storage area. This is where the cleaning chemicals used will frequently be stored. It is locked to maintain safety in the health care facility. The bottom platform of the cart will have a place to keep the mop bucket, wringer, and the wet mop. The cart may also have projections to hang "wet floor" signs and to store the dust mop.

Figure 1.1 - Housekeeper's Cart



Maintenance of the cart is a daily responsibility of the housekeeper. The cart should be cleaned and restocked before storing at the end of the day. The top and shelves of the cart should be dusted and straightened. Replace any supplies that are getting low. The casters should be cleaned and rolling smoothly. The mop bucket should be emptied and rinsed.

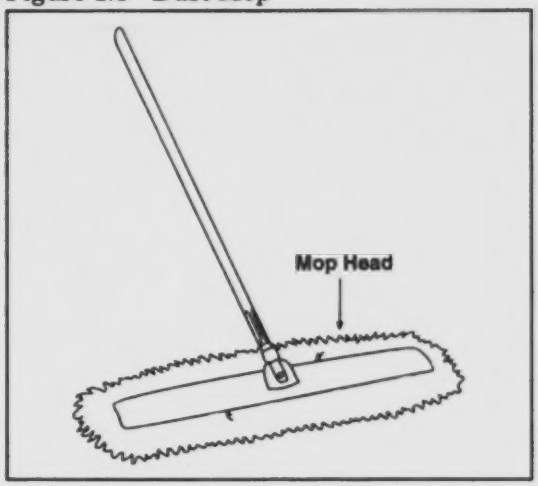
The vacuum cleaner is a piece of equipment used by the housekeeper to maintain the carpeted floor surfaces on a daily basis. The vacuum cleaner will have a bag that collects the dust vacuumed from the carpet. Change the bag when it is full to prevent the motor of the vacuum from working too hard. If the vacuum cleaner is used when the bag is overfull, it will also be less effective in cleaning the carpet. The electrical cord of the vacuum cleaner should be inspected. If frays in the electrical cord are noted, the vacuum should not be used and the defective cord should be reported to the supervisor. See Figure 1.2 for an example of a vacuum cleaner.

The housekeeper will use a dust mop each day. The dust mop is used dry to clean hard floor surfaces of dust. The mop will have a long handle and a rectangular shaped mop head. The head should be changed when it is soiled. See Figure 1.3 for an example of a dust mop.

The wet mop is used to clean hard floor surfaces. This type of mop is used wet or damp for heavier soiling of hard surfaces.

Figure 1.2 - Vacuum Cleaner

Figure 1.3 - Dust Mop



The wet mop has a long handle with a mop head made of long strips of cotton or synthetic yarn. The mop head will need to be changed regularly throughout the day. Clean the head thoroughly at the end of the day. See Figure 1.4 for an example of a wet mop.

The mop bucket, sometimes called the mop tank, is used with the wet mop. The mop bucket is a large plastic bucket that contains the floor cleaner for mopping. An attachment, called the **wringer**, is attached to the mop bucket to press out excess water

Figure 1.4 - Wet Mop

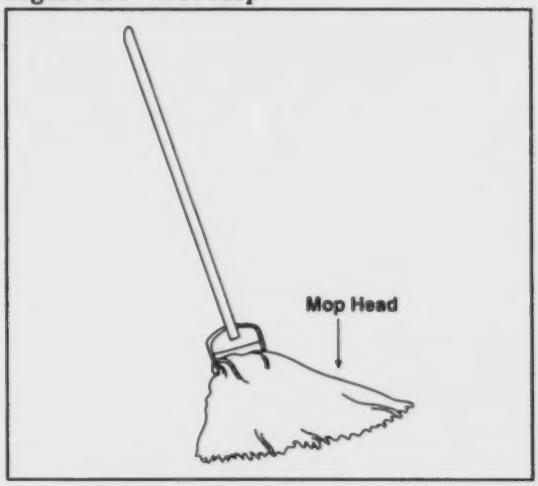
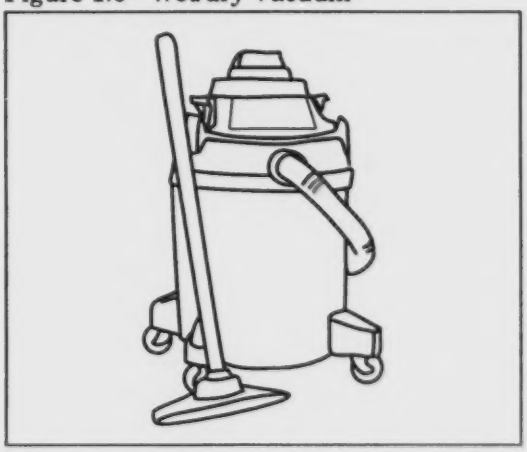


Figure 1.5 - Mop Bucket

from the mop. Removing excess water from the mop will help to keep the floor from getting too wet. The water in the mop bucket needs to be changed on a regular basis. Empty the bucket at the end of the day, rinse it, and allow it to air dry. See Figure 1.5 for an example of a mop bucket.

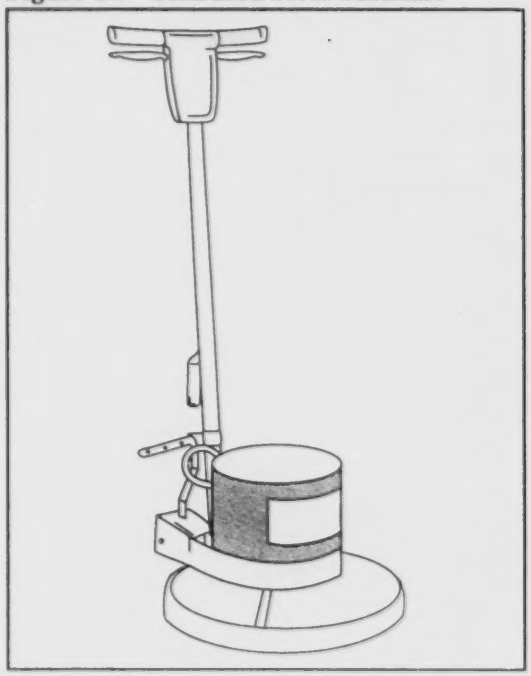
The **wet/dry vacuum** can be used to vacuum dirt or water. The housekeeper may not use it on a daily basis but it is very useful to vacuum large amounts of water from a floor. When vacuuming water, it is extremely important that the cord is checked for fraying before plugging the vacuum into an outlet. Water is an excellent conductor of electricity and if there is a break in the cord, it could cause an electrical shock or electrocution. The wet/dry vacuum will have a tank where the water or dirt is collected. This type of vacuum is usually on wheels. Following use, the tank should be emptied, rinsed, and allowed to dry. See Figure 1.6 for an example of a wet/dry vacuum.

Figure 1.6 - Wet/dry Vacuum



The standard floor machine performs a variety of operations. It is used for top scrubbing, stripping, polishing, and buffing. These processes will be discussed in lesson 3 of this unit. The standard floor machine is powered by electricity. It has a pad that works from side to side and spins at speeds of 175 to 300 rpm's. Some floor machines have a switch to allow for variable speed settings. Keep the cord away from the machine to keep it from getting caught in the pad holder or brush. Unplug the machine and recoil the cord if the job is interrupted and when the job is finished. Training on this equipment will typically be

Figure 1.7 - Standard Floor Machine



provided by the facility prior to use. See Figure 1.7 for an example of a floor machine.

Preventive Maintenance

Maintenance of the equipment being used is also an important responsibility that the housekeeper must assume. In order for the housekeeper to do his or her job correctly, the equipment he or she uses should be working correctly. Equipment that is working correctly lasts longer and does a better job of keeping the health care facility clean. Maintaining the machinery also prevents accidents that could harm employees of the health care facility and the clients that are there to get better.

Disinfection of Equipment

There may be times when the wet/dry vacuum is used to clean up a spill of blood or body fluids. The tank should be disinfected before it is used for other jobs. When a wet mop is used to clean up blood or body fluids, the mop head should be changed and the soiled mop head should be placed in a biohazard bag and sent to laundry. Each facility will provide guidelines to follow for disinfecting housekeeping equipment.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: Housekeeping Equipment

Activity Sheet

Match the following diagrams of housekeeping equipment to the appropriate name.

_____ 1. Housekeeper's cart

_____ 2. Vacuum cleaner

_____ 3. Dust mop

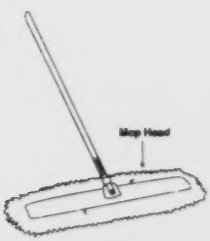
_____ 4. Wet mop

_____ 5. Mop bucket

_____ 6. Wet/dry vacuum

_____ 7. Standard floor machine

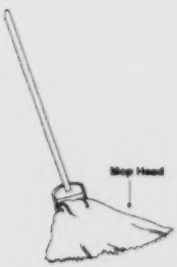
a.



c.

e.

g.



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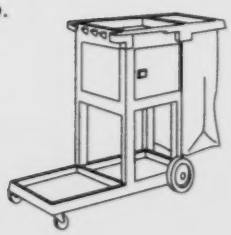


d.

f.

8. Describe why daily maintenance of the housekeeper's equipment is important.

_____

_____

_____

9. When is it necessary to disinfect equipment used by the housekeeper?

_____

_____

_____

Clinical/Laboratory Activities

1. Locate each of the following pieces of equipment used by the housekeeper at the clinical site.

   a. Housekeeper's cart
   b. Vacuum cleaner
   c. Dust mop
   d. Wet mop
   e. Mop bucket
   f. Wet/dry vacuum
   g. Standard floor machine

2. Observe a housekeeper using each of the above pieces of equipment.

3. Write a paper describing how each type of equipment was used in the clinical site. Ask the housekeeper you observe to describe the type of daily maintenance done on each piece of equipment. Include this information in your paper. Turn the paper in to the instructor at the completion of this clinical experience.

Lesson 2:
Routine Cleaning Tasks

Objectives:

A. Empty trash safely.

B. Damp dust surfaces.

C. Clean glass surfaces and mirrors.

D. Clean sink.

E. Clean toilet.

F. Complete detailed wall cleaning.

G. Clean ceilings, overhead lights, and vents.

H. Clean shower.

I. Clean tub.

J. Clean client bed.

K. Dust mop floor.

L. Damp mop floor.

M. Clean blinds

N. Vacuum carpeted floors.

O. Clean overbed and bedside tables.

P. Clean furniture.

Q. Use proper body mechanics while cleaning.

R. Check for repair and replacement needs.

S. Inspect window and cubicle curtains and replace as needed.

Each day the housekeeper will be assigned specific responsibilities. The skills discussed in this lesson represent skills that are done on a daily basis. A regular routine of cleaning procedures will be established by the housekeeper.

Empty Trash

Besides cleaning client rooms, restrooms, utility rooms, nurses station, and conference rooms, the housekeeper will need to empty the trash and place clean liners in the trash cans. Because the housekeeper does not know what might have been placed in the trash can, it is important to use caution when emptying the trash. The housekeeper will always use standard precautions since biohazardous material could have been placed in the regular trash. Be cautious also for the possibility of sharp items such as a piece of glass, a sharp metal edge, or a needle or scalpel blade accidentally placed in the regular trash. Never push items into the trash bag with the hands.

Steps of Procedure for Emptying Trash

1. Bring the housekeeper's cart near the door of the room in which you will be working.
2. Select the appropriate size trash can liner for the trash container being emptied in the room.
3. Put on nonsterile gloves.
4. Remove the old trash can liner from the trash can.
5. Tie the bag.
6. Place a clean trash can liner in the trash can. (Some facilities may leave 2

or 3 extra liners in the bottom of the trash can in case the container gets full before the next scheduled pickup time.)

7. Place the trash into the large trash bag on the housekeeper's cart.

Dusting Surfaces

Health care facilities have many flat surfaces that will collect dust. Microorganisms may be found in the dust and some clients may be allergic to dust. Damp dusting is used in health care facilities to prevent the dust and microorganisms from getting into the air where it can spread to clients and staff. A disinfectant will be used for dusting most surfaces to control the spread of microorganisms.

The housekeeper will use a cleaning cloth when damp dusting. To provide many potential cleaning surfaces, fold the cloth into a series of squares. A cloth that is wadded up is less effective in dusting. Look for rough spots or splinters on the surfaces to be dusted. These areas can cause cuts or scratchs even with gloves. When dusting, begin at the top and work down the sides. This will prevent soiling surfaces already dusted. Go to each item throughout the room, refolding the cleaning cloth to expose a clean surface. Never shake the dust cloth. This will scatter the dust and microorganisms. Damp dusting is recommended for most areas the housekeeper is assigned to clean.

Steps of Procedure for Damp Dusting

1. Select the spray bottle with all-purpose cleaner or disinfectant or prepare a bucket with the proper cleaning solution. (The cleaner used will depend on the surfaces to be cleaned and policy of the facility.)
2. Select a clean dusting cloth.
3. Put on nonsterile gloves.
4. Fold the cloth into a series of squares.
5. Dampen the cloth in water or germicidal solution, depending on the requirement of the area. Squeeze out all excess solution to avoid drips.
6. Mist the area to be dusted lightly if using the spray bottle.
7. Begin dusting at the entrance door and work around the room.
8. Wipe the surface with a clean, dry cloth to prevent streaking and water spots immediately after damp dusting each item in the room.
9. Place dirty cloths in a linen bag to be sent to the laundry for cleaning at the end of the shift.
10. Remove gloves.
11. Wash hands.
12. Return equipment to the housekeeper's cart.

Cleaning Glass Surfaces and Mirrors

The housekeeper will need to clean many glass surfaces and mirrors throughout the health care facility. Clean windows or mirrors give the health care facility an appearance of cleanliness and also eliminates microorganisms that may form on glass and mirror surfaces.

Steps of Procedure for Cleaning Glass Surfaces and Mirrors

1. Select clean dry buffing cloths.
2. Select window glass cleaner.
3. Apply window cleaner to the mirror or window glass.
4. Buff the surface dry using a clean, dry buffing cloth.
5. Make sure all streaks and spots are cleaned from the mirror or window.

Cleaning Sinks

The housekeeper will clean sinks in client rooms, restrooms, and utility rooms. The purpose of this procedure is to maintain a clean, attractive environment and prevent the spread of microorganisms throughout the health care facility. Cleaning chemicals must be used as directed by the manufacturer. Only use cleaning chemicals on surfaces designated by the manufacturer. Use a mask, goggles, or face shield if there is a possibility of chemicals splashing into the eyes, nose, or mouth.

Steps of Procedure for Cleaning a Sink

1. Select appropriate equipment: cleaning cloths, germicide solution, or powdered cleanser, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Apply germicidal solution to the sink or moisten all areas of the sink and apply powdered cleanser.
4. Clean all interior and exterior surfaces of the sink with a clean cloth, dampened with germicide solution (or water if using a powdered cleanser).
5. To remove stains, use a lotion-type (mildly abrasive) cleanser with a brush or use a sponge with an abrasive pad to scour the stain.
6. Thoroughly rinse and dry all areas of the sink, including the metal fixtures.
7. Wipe the plumbing underneath the fixture or dust the plumbing underneath depending on facility policy.
8. Place soiled cleaning cloths into a bag to be sent to the laundry.
9. Remove nonsterile gloves.
10. Wash hands.
11. Return all chemicals and equipment to the proper storage location.

Cleaning Toilets

A clean toilet in the guest restrooms or the client rooms is a sign to guests of the cleanliness of a health care facility. Toilets must be thoroughly cleaned on a daily basis to improve the appearance of the environment, eliminate odors, and prevent the spread of microorganisms to other clients, staff, or guests. Toilet bowl cleaner is a mild acid and will irritate the skin if it comes in contact. Use extra caution when working with these chemicals. Use a mask and goggles or a mask with a face shield if there is the possibility of splashing into the eyes, nose, or mouth.

Steps of Procedure for Cleaning the Toilet

1. Select the appropriate equipment: toilet bowl cleaner (gallon bucket if cleaner is to be diluted), cleaning cloths, toilet bowl mop, and gloves.
2. Put on nonsterile gloves.
3. Mix disinfectant/detergent with water in a gallon bucket if necessary.
4. Flush the toilet.
5. Apply toilet bowl cleaner to the interior surfaces of the toilet.
6. Clean the inside of the toilet bowl completely. Clean the underside of the rim of the toilet.
7. Apply disinfectant to the toilet seat and all other outside surfaces including the pipes and toilet base.
8. Clean toilet seat and other outside surfaces with a clean cloth.
9. Buff dry.
10. Place soiled cleaning cloths into a bag to be sent to the laundry.
11. Remove nonsterile gloves.
12. Wash hands.
13. Return all chemicals and equipment to the proper storage location.

Cleaning Walls

The walls in the room reflect the cleanliness of the health care facility environment. Spots or stains on the walls reflect a lack of care about the facility. Occasionally an object will be pushed against the wall and leave a mark, or something will spill and splash onto the wall. Inspect walls as a part of the daily cleaning of a client room. If a spot or stain is noted, clean it as a part of the daily room cleaning.

On a rotating basis (e.g., every three months), the walls will be entirely cleaned. Facility policy will determine when this is done. Some facilities may complete detailed wall cleaning between clients or a hall or wing may be scheduled to be done each month. A detailed wall cleaning means that all the surfaces of the wall, including the baseboards, are cleaned.

Steps of Procedure for Detailed Wall Cleaning

1. Select the appropriate equipment: disinfectant, cleaning cloths, and gloves.
2. Put on nonsterile gloves.
3. Spray a section of the wall with disinfectant cleaner.
4. Scrub the wall with a clean cloth dampened with disinfectant.
5. Continue with sections of the wall until the entire wall surface has been cleaned.
6. Place soiled cleaning cloths into a bag to be sent to the laundry.
7. Remove nonsterile gloves.
8. Wash hands.
9. Return all chemicals and equipment to the proper storage location.

Cleaning Ceilings, Overhead Lights, and Vents

Ceilings may also become soiled and need to be cleaned on a rotating basis. This also includes vents high in the walls and the overhead lighting. Cobwebs in the corners reflects inadequate cleaning and gives the clients and guests a poor impression of the facility.

Steps of Procedure for Cleaning Ceilings, Overhead Lights, and Vents

1. Select the appropriate equipment: disinfectant, two plastic buckets, cleaning cloths, ladder, vacuum, and gloves.
2. Put on nonsterile gloves.
3. Move the furniture in the room to provide adequate work space under the ceiling. Furnishings which cannot be removed from the area should be covered with a drop cloth.
4. Set up the ladder under the area to be cleaned. Remember to use a ladder only on a flat level surface and do not stand on the top step of the ladder.
5. Vacuum the entire ceiling using brush accessories to remove loose surface dust. Vents should be vacuumed.
6. Fill one bucket with water. Fill the second bucket with the correct mixture of water and disinfectant cleaner.
7. Place the bucket of water with disinfectant on the ladder shelf.
8. Wash the entire ceiling area with a clean damp cloth. Do not try to reach too far; move the ladder to maintain safety.
9. Place the bucket of water on the ladder shelf.
10. Rinse the ceiling with a clean cloth dampened in the clear water.

11. Remove overhead light globes.
12. Wash in a clean disinfectant solution.
13. Rinse in clear water.
14. Dry thoroughly with a clean cloth.
15. Replace overhead light globes.
16. Place soiled cleaning cloths into a bag to be sent to the laundry.
17. Remove nonsterile gloves.
18. Wash hands.
19. Return all chemicals and equipment to the proper storage location.

Cleaning Showers

Since microorganisms grow best in warm, moist, dark environments, the shower is a perfect place for their growth. It is important to be sure the shower is cleaned thoroughly between clients. This is usually the responsibility of the nursing staff. The shower will be cleaned daily by the housekeeping staff.

Steps of Procedure for Cleaning the Shower

1. Select the appropriate equipment: germicide solution or powder cleanser, cleaning cloths, and nonsterile gloves.
2. Put on nonsterile gloves.
3. If using a powder cleanser, dampen the entire shower surface.
4. If using a germicide solution, apply solution to the interior surfaces including the shower curtain or door tracks, doors, walls, soap dish, faucets, and shower head.
5. Use dampened cleaning cloths if using powder cleanser, or clean cloths dampened in germicidal solution, to wipe all surfaces of the shower.
6. Use a brush, if necessary, to remove soap scum from the wall or floor of the shower.
7. Rinse all surfaces thoroughly.
8. Dry all surfaces carefully to prevent slips and falls.
9. Damp wipe all chrome handles and fittings.
10. Dry chrome handles and fittings with a dry cloth to prevent spotting.
11. Inspect the shower curtain for visible soil. If soiled, replace it with a clean one. Bag the soiled curtain for laundering or dry cleaning.
12. Place soiled cleaning cloths into a bag to be sent to the laundry.
13. Remove nonsterile gloves.
14. Wash hands.
15. Return all chemicals and equipment to the proper storage location.

Cleaning Bathtubs

Cleaning the tub is much like cleaning the shower. This is a warm, moist environment which is perfect for the growth of microorganisms which can be spread from one client to the next client using the tub. Thorough disinfection of the tub between clients is essential and is usually done by the nursing staff. The housekeeping staff will thoroughly clean the tub room daily.

Steps of Procedure for Cleaning a Bathtub

1. Select the appropriate equipment: germicide solution or powder cleanser, cleaning cloths, and nonsterile gloves.
2. Put on nonsterile gloves.
3. If using a powder cleanser, dampen the entire tub surface.
4. If using a germicide solution, apply solution to the interior surfaces including the soap dish and faucets.
5. Use dampened cleaning cloths if using powder cleanser, or clean cloths dampened in germicidal solution to wipe all surfaces of the tub.

6. Use a brush, if necessary, to remove soap scum from the surface of the tub.
7. Rinse all surfaces thoroughly.
8. Dry all surfaces carefully to prevent slips and falls.
9. Damp wipe all chrome handles and fittings.
10. Dry chrome handles and fittings with a dry cloth to prevent spotting.
11. Place soiled cleaning cloths into a bag to be sent to the laundry.
12. Remove nonsterile gloves.
13. Wash hands.
14. Return all chemicals and equipment to the proper storage location.

Cleaning Client Beds

The client's bed is the main piece of equipment in a client room. The client typically spends a great deal of time in the bed. It is important that the bed be disinfected on a regular basis. In long-term care facilities, the beds will be cleaned between residents and on a regular rotating basis such as once a week. In hospitals, the beds will be cleaned between clients.

Steps of Procedure for Cleaning a Client Bed

1. Select the appropriate equipment: germicide solution, bucket, cleaning cloths, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Mix disinfectant/detergent and water in bucket.
4. Clean the top of the overbed table with cleaning cloth soaked in disinfectant solution.
5. Clean one side of the pillow while the pillow is laying on the bed.
6. Place the clean side of the pillow onto the clean overbed table.
7. Clean the dirty side of the pillow. (Observe the pillow for any tears or cracks - replace if necessary).
8. Begin cleaning the bed at the headboard.
9. Wipe the top of the mattress using a cloth and disinfectant solution. (Check for cracks and tears and report if any are found.)
10. Turn the mattress sideways to one end of the bed.
11. Clean the frame of the bed, including the springs and legs.
12. Turn the mattress over onto the cleaned portion of the frame. Clean the top side of the mattress and wipe with disinfectant. Clean the other other half of the frame. (Check the mattress for cracks and tears. Report if any are found.)
13. Clean the side rails and the bed control panel. Work toward the foot of the bed until all surfaces have been cleaned. Complete the cleaning by wiping the wheels.
14. Inspect the bed while cleaning. Report any damage or needed repairs to the supervisor.
15. Empty the dirty water from the bucket and rinse the bucket.
16. Place soiled cleaning cloths into a bag to be sent to the laundry.
17. Remove nonsterile gloves.
18. Wash hands.
19. Return all chemicals and equipment to the proper storage location.
20. Make the bed. (Steps of procedure for making a client bed is discussed in Unit IV, Lesson 1.)
21. Use facility policy to notify nursing staff that the bed is clean.

Dust Mopping

Dust mopping is done to remove trash on the floor, dust, and light soil. It may be

done in preparation for damp mopping or automatic floor scrubbing. The dust mop head is treated with a chemical that traps the dust and prevents the dust (which may include microorganisms) from getting into the air. Never shake the dust mop since this will release the dust into the air. The head of the dust mop must be changed after cleaning an isolation room, restroom, or when the mop head becomes soiled.

Steps of Procedure for Dust Mopping the Floor

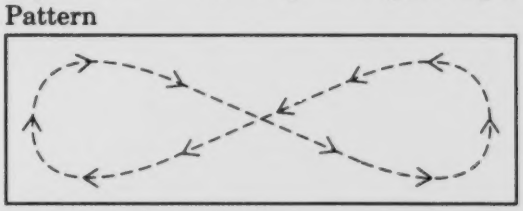
1. Select the appropriate equipment: treated dust mop head, correct size dust mop frame and handle, dust pan, small brush, and a putty knife.
2. Attach the dust mop head to the dust mop frame.
3. Starting at one end of the corridor, walk behind the mop pushing it in front of you. Do not lift the mop off the floor once you have started. Use a swivel motion of the frame and wrist action to change direction.
4. Move all carts and equipment, dust carefully underneath them, and replace them after passing.
5. Remove any gum or other sticky residue from the floor by gently prying it loose with the putty knife. Be careful not to scratch the floor finish.
6. Pivot the mop at the end of the area and return.
7. After mopping an entire area, gently sweep the pile of litter and dirt into the dustpan using the small broom. Be careful not to stir up the dust.
8. Dispose of the dirt and litter in an appropriate trash container.
9. Change the dust mop head when necessary.
10. Remove the dust mop head and place it in a bag for laundering and retreatment at the end of the shift.
11. Return the dust mop equipment to the proper storage area. Do not store the mop with the mop head attached to the mop frame.

Wet Mopping

Use a wet mop when the floor is soiled with dirt or liquids, as part of a regular routine, or in preparation for additional floor work such as stripping and resurfacing. When wet mopping an area that has been soiled with blood or a body fluid, be sure to use standard precautions.

When mopping, the strands of the mop head should be spread over a wide area of the floor. Mopping should be done using a figure-eight pattern (see Figure 4.1) to allow for overlap of areas being mopped to avoid missing spots. Remember a basic principle of body mechanics is to use body weight to assist in doing the work. Move the body from side to side when mopping, using the strong muscles of the legs to do the work rather than the arms.

Figure 4.1 - Wet Mop in Figure-Eight Pattern



When mopping a hallway, begin at the baseboard and mop to the center of the hall. Complete the entire area and allow it to dry before moving to the other side. This always allows a dry walk area. When mopping a room, begin in the far corner of the room and work toward the door. Disinfectant water will typically need to be

changed every 3-4 rooms. See the facility procedure for how frequently water is to be changed in the facility.

Steps of Procedure for Damp Mopping the Floor

1. Select the appropriate equipment: mop cart with mop bucket and wringer, wet mop head and handle, germicide/disinfectant, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Fill bucket with water.
4. Add germicide/disinfectant solution according to facility policy.
5. Dust mop the area to be wet mopped.
6. Place wet-floor signs at each end of the work area.
7. Wet the mop in the germicide/disinfectant solution.
8. Wring mop head enough to prevent dripping and pooling of the solution on the floor.
9. Mop the floor. Turn the mop over when one side becomes dirty.
10. Rinse the mop when both sides of the mop have become dirty. Rinsing is usually required every eight to ten feet.
11. Change the mop head when it becomes dirty.
12. Change the germicide/disinfectant solution when it becomes dirty, when you change work areas, or as directed by the facility procedure manual.
13. Empty the dirty water when all areas have been completed.
14. Clean the bucket, wringer, and mop cart.
15. Place dirty mop heads in a bag and send to laundry.
16. Remove nonsterile gloves.
17. Wash hands.
18. Return all chemicals and equipment to the proper storage location.
19. Pick up wet floor signs when the area has dried.

Cleaning Blinds

Window blinds are useful to keep excessive light from entering a room; however, they are also perfect dust catchers. Blinds must be cleaned on a regular basis to remove accumulated dust that may contain microorganisms.

Steps of Procedure for Cleaning Blinds

1. Select the appropriate equipment: cleaning bucket, disinfectant, clean cleaning cloths, ladder, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Fill bucket with water.
4. Add germicide/disinfectant solution according to facility policy.
5. Position ladder near the blinds to be cleaned.
6. Clean each leaf of the blinds, starting at the top and working down. Cover the top and bottom at the same time, washing from one end to the other.
7. Empty the dirty water from the bucket and rinse the bucket.
8. Place soiled cleaning cloths into a bag to be sent to the laundry.
9. Remove nonsterile gloves.
10. Wash hands.
11. Return all chemicals and equipment to the proper storage location.

Vacuuming

Vacuuming the carpeted floors is important to maintain a neat, clean, and healthy environment. Dust, containing micro-organisms, must be vacuumed from the carpet on a daily basis. Failure to thoroughly vacuum carpets on a regular basis can decrease the life span of the carpet. When vacuuming, observe for a physician or family talking with a client or

staff on the telephone so the noise of the vacuum will not interrupt communication.

Steps of Procedure for Vacuuming Carpeted Floors

1. Select the appropriate equipment: vacuum, edging tool, and replacement filter bags.
2. Check the bag to be sure it is not too full.
3. Pick up large pieces of paper and other debris by hand and place in trash can.
4. Begin to vacuum in the farthest corner and work toward the door. Vacuum the entire area, moving all furniture as you go and return it to the original location. Be sure that cords are kept out of the walkway.
5. Use the edging tool to clean along the baseboard and other areas the vacuum cannot reach.
6. Return the vacuum to its storage area.

Cleaning Overbed and Bedside Tables

The overbed table is a table on wheels that fits over a client's bed. It is used for the client to eat meals, to store frequently needed client belongings, and activities of the client. The bedside table sits near the bed and stores client supplies such as a toothbrush, comb, brush, facial tissues, bedpan, and wash basin. Both of these tables need to be kept clean and clutter free. Microorganisms can be present on these tables since they are used frequently by the client.

Steps of Procedure for Cleaning the Overbed Table and Bedside Table

1. Select the appropriate equipment: cleaning bucket, disinfectant, clean cleaning cloths, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Fill bucket with water.
4. Add germicide/disinfectant solution according to facility policy.
5. Disinfect the top of the bedside table and all four sides including the legs.
6. Disinfect inside and outside of the drawers.
7. Raise the overbed table to full height.
8. Disinfect the top of the overbed table, inside and outside of the drawer, the pedestal, base, and wheels.
9. Empty the dirty water from the bucket and rinse the bucket.
10. Place soiled cleaning cloths into a bag to be sent to the laundry.
11. Remove nonsterile gloves.
12. Wash hands.
13. Return all chemicals and equipment to the proper storage location.

Cleaning Furniture

Often the furniture in the visitor's area, the lounge area, or the waiting area will have a vinyl or plastic outer surface. These must be cleaned to maintain a neat, clean, and healthy environment.

Steps of Procedure for Cleaning Furniture (non-wooden)

1. Select the appropriate equipment: cleaning bucket, disinfectant, fresh cleaning cloths, and nonsterile gloves.
2. Put on nonsterile gloves.
3. Fill bucket with water.
4. Add germicide/disinfectant solution according to facility policy.
5. Use a cleaning cloth dampened with germicide/disinfectant solution to wash the surfaces of all non-wooden furniture that has a washable surface.
6. Wash all surfaces of the furniture including the legs.

7. Dry all furnishings so there will be no water spots.
8. Empty the dirty water from the bucket and rinse the bucket.
9. Place soiled cleaning cloths into a bag to be sent to the laundry.
10. Remove nonsterile gloves.
11. Wash hands.
12. Return all chemicals and equipment to the proper storage location.

Proper Body Mechanics

The housekeeper should keep safety in mind throughout all of the daily cleaning tasks. Always use proper body mechanics while working and use standard precautions in all procedures. Use of proper body mechanics will minimize fatigue and prevent injuries.

Checking for Repair and Replacement Needs

As the housekeeper proceeds with cleaning, he or she should note any stains on surfaces, damage to floors or walls, and equipment that is not functioning correctly. Report any of these irregularities to the housekeeping supervisor.

Inspecting and Replacing Curtains

As the housekeeper cleans each room or area, check the condition of the window and cubicle curtains if present. If they are dirty or torn they need to be replaced. Dirty curtains should be sent to the luandry area. Report torn curtains to the housekeeping supervisor.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 2: Routine Cleaning Tasks

Activity Sheet

1. Discuss the importance of using proper body mechanics when performing routine cleaning procedures.

_____

_____

_____

2. Discuss why it is important to observe and report needed repairs or equipment malfunctions while performing the daily tasks of the housekeeper?

_____

_____

_____

Clinical/Laboratory Activities

During your assigned clinical time, pair up with a housekeeper and observe the procedures discussed in this lesson. Once you have observed the procedure, perform the task under the supervision of a housekeeper.

Housekeeping Task	Date Observed	Date Performed
1. Empty trash.		
2. Damp dust surfaces.		
3. Clean glass surfaces and mirrors.		
4. Clean sink.		
5. Clean toilet.		
6. Complete detailed wall cleaning.		
7. Clean ceilings, overhead lights, and vents.		
8. Clean shower.		
9. Clean bathtub.		
10. Clean client bed.		

Housekeeping Task	Date Observed	Date Performed
11. Dust mop floor.		
12. Damp mop floor.		
13. Clean blinds.		
14. Vacuum carpet floors.		
15. Clean overbed table and bedside table.		
16. Clean furniture.		

Lesson 3:
Floor Cleaning

Objectives:

A. Identify types of floor surfaces.

B. Use safety precautions when cleaning floors.

C. Top scrub and recoat floor.

D. Strip and recoat floor.

E. Spray buff floor.

F. Clean carpet by using wet extraction.

G. Clean carpet by using bonnet cleaning method.

H. Clean carpet by using the dry extraction method.

I. Clean spot from carpet.

J. Clean blood or body substance from a carpeted surface.

K. Clean blood or body substance from a hard floor surface.

The floor is the largest and dirtiest area to be maintained in a health care facility. Dust containing microorganisms settles on the floor. Dirt is brought in from other areas by people walking on the floor. The floor endures a great deal of wear and tear from people walking on its surface and from heavy equipment being moved across the surface. A health care facility invests a lot of money in floor surfaces that are sturdy and durable. Maintenance of facility floors is important in maintaining the life of the floor, the health and safety of the facility, and the general appearance of the facility.

Different Types of Floor Surfaces

Different types of floor surfaces will be used throughout the health care facility. The type of surface will be determined by the location and what activities will be performed in that area. For example, carpet is usually chosen for the administrative offices and a hard surface is chosen for the operating room floor. The following are examples of the types of floor surfaces the housekeeper may need to clean.

Carpet is a type of surface that is constructed of loops of yarn secured in a backing. It provides a soft and cushioned walking surface. It may be laid with a pad underneath for a more cushioned surface or glued directly onto the hard surface underneath (e.g., indoor-outdoor carpet). A carpeted surface will be used in office areas, hallways, and sometimes client rooms.

Another type of floor surface is vinyl or linoleum. Vinyl is a very durable, flexible material that holds up well in heavy traffic areas. It is laid in sheets or in individual tiles. Linoleum is usually installed in large sheets from a continuous roll. Wet spills are easier to cleanup on vinyl or linoleum than carpet.

Tiles are individual pieces of hard flooring, usually in squares, that are set together by using grout to fill the spaces. Tiles are generally very strong. This type of floor surface is often used for restrooms, shower rooms, or the kitchen. Care must be taken to keep the grout clean to keep mold and mildew from growing in these areas.

Some areas of the health care facility may have concrete floors. These areas may include shipping and receiving, central storage, and maintenance areas.

Use Safety Precautions when Cleaning Floors

Maintaining personal safety and creating a safe environment for clients, staff, and visitors is essential. The following are reminders of safe work habits the housekeeper should always use when cleaning the floors.

- Place wet floor signs at each end of the area being cleaned before beginning the procedure. Leave signs in place until the floor is completely dry and safe to walk on again.

- Use proper body mechanics when mopping or using the electrical cleaning, stripping, and buffing equipment. Remember to use the strong leg muscles rather than the back or arm muscles to avoid injury and to decrease fatigue. Do not twist the back to reach for an object. Squat to clean the baseboard or corners; do not bend at the waist. Do not try to lift an object that is too heavy. Push or pull furniture or equipment when moving it or get someone to help.

- Complete one half of a hallway at a time, leaving the other half for people to walk on.

- Place the housekeeper's cart out of traffic areas to allow adequate room for people to walk.

- Make sure the electrical cords have no fraying ends or bare wires. Many of the procedures for floor care include working with water. This is particularly dangerous if the electrical cords are worn or frayed.

- Try to avoid running cords across high traffic areas. Unplug the cord when the equipment is not in use to prevent tripping.

- Use standard precautions when working with hazardous chemicals or when cleaning a blood or body fluid spill.

Top Scrubbing and Recoating

Top scrubbing is the use of a cleaning solution along with a standard floor cleaning machine to thoroughly cleanse the floor surface. After cleaning, follow with an application of a new floor finish. This is called recoating.

Steps of Procedure for Top Scrubbing and Recoating Floor

1. Select the appropriate equipment: wet floor signs, rotary floor machine with appropriate pad, dust mop, three mop buckets with two wringers, wet mop and three wet mop heads, scrub solution, floor finish, wet/dry vacuum, cleaning cloths, putty knife, hand strip pads, and drop cloths.
2. Prepare scrub solution in mop bucket according to facility policy.
3. Place clear rinse water in a second mop bucket.
4. Move furniture and equipment out of the way if necessary. Do not block passageways, doorways, or fire exits.
5. Place wet floor signs and mark off the area to be scrubbed.
6. Dust mop the area to be scrubbed.
7. Use wet mop to apply scrub solution from the mop bucket. DO NOT WRING

OUT MOP. Place saturated mop directly on the floor and spread solution. DO NOT SPLASH.

8. Scrub the baseboard, corners, and edges using the hand pad and putty knife as needed.
9. Scrub floor using the rotary floor machine. Start the machine in the center of the wet area and guide the machine from side to side to cover the entire area. Do not splash scrub solution against the wall.
10. Reapply scrub solution as needed.
11. Use the wet/dry vacuum to pick up the dirty scrub solution from the floor.
12. Thoroughly rinse the area with clear water.
13. Repeat steps 10-12 until the entire area is scrubbed, vacuumed, and rinsed.
14. Allow the area to dry thoroughly.
15. Line mop bucket with a plastic trash can liner.
16. Pour floor finish into the lined mop bucket.
17. Use a clean wet mop head and apply the first coat of floor finish. Outline the area up to approximately two (2) inches from the baseboard. DO NOT APPLY FLOOR FINISH ON THE BASEBOARDS.
18. Allow to dry.
19. Apply a second coat of floor finish.
20. Allow to dry thoroughly.
21. Return equipment to storage.
22. Rinse mop buckets and allow to dry.
23. Discard the trash can liner used in the finish bucket.
24. Place soiled mop heads in a bag and send to the laundry.
25. Remove the pad from the rotary floor machine. Wash, rinse, and dry it thoroughly before storing. Wipe the machine clean.
26. Remove wet floor signs when the area is completely dry.
27. Do not buff the floor for 24-48 hours after finishing.

Stripping and Recoating Hard Floor Surfaces

The hard floor surface may need to be stripped when the finish no longer responds to cleaning and buffing procedures. This is determined when the floor appears dull and dirty after a thorough scrubbing has been completed. Stripping the floor means to remove all of the old finish, including ground-in soil, before recoating the floor.

Steps of Procedure for Stripping and Recoating a Hard Floor

1. Select the appropriate equipment: wet floor signs, rotary floor machine with appropriate pad, dust mop, four mop buckets with two wringers, wet mop and four wet mop heads, strip solution, neutral rinse, floor finish, wet/dry vacuum, cleaning cloths, putty knife, hand strip pads, drop cloths, and duct tape.
2. Prepare stripper solution in mop bucket at the proper dilution (according to facility policy).
3. Prepare neutral rinse in mop bucket with the proper dilution (according to facility policy).
4. Prepare one mop bucket with wringer with clear rinse water.
5. Move furniture and equipment out of the way if necessary. Do not block passageways, doorways, or fire exits.
6. Place wet floor signs and mark off the area to be scrubbed. Place duct tape at doorways to establish a clean edge.
7. Dust mop the area to be scrubbed.
8. Apply stripper solution to the floor surface using a wet mop. DO NOT WRING OUT THE MOP. Place saturated mop directly on the floor and spread the solution.
9. Apply stripper solution to baseboards or spray on baseboard stripper.

10. Allow stripper solution to remain on the floor the amount of time recommended by the manufacturer. Do not allow the stripper solution to dry on the floor. Apply additional stripper if necessary.
11. Use the rotary scrub machine to scrub the area where the stripper has been applied. Overlap each scrub path.
12. Scrub the baseboard, corners, and edges with a hand pad or putty knife as needed.
13. Vacuum the stripper solution with a wet/dry vacuum.
14. Repeat steps 8-11 on areas where any floor finish remains.
15. Apply neutral rinse solution using a clean wet mop. DO NOT WRING OUT THE MOP. Place saturated mop directly on the floor and spread the solution. Apply solution to the baseboards also.
16. Vacuum the neutral rinse solution with a wet/dry vacuum.
17. Rinse the floor and baseboards using the clear rinse water from the bucket with the wringer and a clean mop head.
18. Allow the floor to dry thoroughly.
19. Line mop bucket with a plastic trash can liner.
20. Pour floor finish into the lined mop bucket.
21. Using a clean wet mop head, apply the first coat of floor finish. Outline the area up to approximately two (2) inches from he baseboard. DO NOT APPLY FLOOR FINISH ON BASEBOARDS.
22. Allow to dry.
23. Apply three to four coats of floor finish, allowing each coat to dry thoroughly before applying the next coat.
24. Return equipment to storage.
25. Rinse mop buckets and allow to dry.
26. Discard the trash can liner used in the finish bucket.
27. Place soiled mop heads in bag and send to laundry.
28. Remove the pad from the rotary floor machine. Wash, rinse, and dry it thoroughly before storing. Wipe the machine clean.
29. Remove wet floor signs when the area is completely dry.
30. Do not buff the floor for 24-48 hours after finishing.

Spray Buffing

Spray buffing is a procedure to provide a shiny, clean finish to hard floor surfaces. It is done after the floor surface has been dust mopped, damp mopped, and allowed to dry. Be sure all gum, tape, other debris, or marks such as scuffs from shoes, have been removed. A high speed floor machine is used for this procedure.

Steps of Procedure for Spray Buffing the Floor

1. Select the appropriate equipment: 1400-1500 RPM high speed floor machine, buffing pads, spray buff solution, putty knife, dust mop and handle, counter brush and dust pan, wet mop, mop bucket and wringer, neutral cleaner solution, and wet floor signs.
2. Dust mop the area to be spray buffed.
3. Mark off the area to be damp mopped with wet floor signs.
4. Damp mop the area to be spray buffed.
5. Observe the floor surface and rid area of gum, tape, black marks, or other debris.
6. Allow the floor to dry.
7. Place buffing pad on the high speed floor machine.
8. Spray a light mist of spray buff solution over a 10 square foot area. Do not apply it too heavy because the pad will become saturated too quickly.

9. Buff the area with the high speed floor machine until the floor surface is dry. Work in a side to side movement covering the area sprayed with the buffing solution. It may appear dull at first, but it will become shiny the more it is buffed. DO NOT allow the pad to touch or mark up the baseboard surface.
10. Replace the buffing pads as they become soiled or full of buffing solution. Be sure to use both sides of the pad.
11. Dust mop the floor after the entire floor area has been spray buffed.
12. Clean all equipment and return it to its proper storage location.

Cleaning Carpeted Floor Surfaces

Carpeted floor surfaces require a completely different type of cleaning procedure from hard floor surfaces. One type of carpet cleaning method requires the use of water with a carpet shampoo. The shampoo is worked into the carpet yarns and then sucked back out using a powerful vacuum. The shampoo picks up the dirt in the carpet and it is removed with the water. Another method is considered a dry carpet cleaning method. Using this method, the chemical is worked into the carpet. The chemical then bonds with the dirt in the carpet and is then vacuumed from the carpet.

Steps of Procedure for Cleaning Carpet by Using Wet Extraction

1. Select the appropriate equipment: wet floor signs, extraction cleaner, spot cleaner, portable extractor, and vacuum cleaner.
2. Fill the machine's solution tank with the extraction cleaner in the correct dilution.
3. Vacuum the carpet in the area to be shampooed.
4. Pre-spray spots or stains with spotting solution.
5. Place the wet floor signs in the area to be cleaned.
6. Inject cleaning solution into the carpet using the wand/head on the portable extractor. Move the head back and forth, evenly wetting the carpet to be cleaned. The vacuum on the extractor will draw the cleaning solution from the carpet as you pass over the carpet.
7. Check the solution in the tank frequently and refill as necessary.
8. Check the water in the recovery/waste tank frequently and empty as necessary.
9. Allow the carpet to dry completely before allowing people to walk on the carpet again. To speed the drying time, a floor drying fan may be used.
10. Disassemble the equipment and return it to the storage area. Empty the solution from the recovery tank and rinse the tank. Clean the hose, wand/head, and extraction unit.

Steps of Procedure for Cleaning Carpet Using a Bonnet Cleaning Method

1. Select the appropriate equipment: wet floor signs, bonnet cleaner, bonnet pads, spot cleaner, conventional low-speed floor machine with shampoo tank and shower-feed brush, vacuum cleaner, scrub brush, and cleaning cloths.
2. Fill the machine's solution tank or pump-up sprayer with properly diluted cleaning chemical.
3. Vacuum the carpet in the area to be shampooed.
4. Pre-spray spots or traffic lanes as necessary.
5. Place a clean bonnet under the floor machine brush.

6. Spray the cleaning solution on the carpet with the pump-up sprayer or begin dispensing a small amount of solution from the tank. DO NOT overwet. Do one section of carpet at a time.
7. Work the area with the machine. Go over the spotted or heavy traffic areas more than once.
8. Once the area has been agitated thoroughly, flip the bonnet pad, and pass over the area again to remove any additional moisture or soil. Change the bonnet pad as it becomes soiled.
9. Repeat steps 6-8 until the entire carpet has been cleaned.
10. Place soiled bonnet pads in plastic bags and send to laundry.
11. Return equipment to storage area. Clean all equipment, and empty solution tank or pump sprayer.

Steps of Procedure for Cleaning Carpet Using the Dry Extraction Method

1. Select the appropriate equipment: dry extraction cleaner, spreader, hand sifter, twin brush scrubber, brush, and vacuum cleaner.
2. Vacuum the carpeted area to be cleaned.
3. Apply dry extraction cleaner with spreader or hand sift as necessary.
4. Agitate into the carpet with twin brush scrubber or hand brush.
5. Allow cleaner to remain on the carpet for a minimum of 30 minutes.
6. Vacuum the carpet thoroughly to remove the cleaner.
7. Return all equipment and supplies to the storage area.
8. Clean and store the equipment.

Cleaning Spots from Carpet

Occasionally the carpet will become soiled heavily in one area. This might be a spot brought in on a person's shoes or a spill of a liquid such as milk or juice. The quicker a spot is cleaned from the carpet, the less likely that a permanent stain will occur. If the spot or stain is not blood or a body fluid, no special precautions need to be taken in cleaning the spot. If the housekeeper is not certain whether the spot was caused by blood or a body fluid, standard precautions should be used. This will be discussed in the next procedure.

Steps of Procedure for Cleaning Spot from Carpet

1. Select the appropriate equipment: cleaning cloths, putty knife, scrub brush, and spotting cleaner.
2. Soak up excess liquid with a towel or a rag.
3. Apply spot cleaner to the stain. Allow the cleaner to soak into the stain.
4. Use a cleaning cloth to blot up the cleaner and the stain.
5. Use the putty knife to work the cleaner into the stain if necessary. Start at the edge of the spot and work inward. Do not spread the spot. Blot with a cleaning cloth to absorb the cleaner and stain.
6. Return the spot cleaner and equipment to storage.
7. Place cleaning cloths in a bag and send to laundry.

Cleaning Blood or Body Fluid From Surfaces

Occasionally blood or a body fluid will be spilled onto carpet or a hard floor surface. This type of spot needs to be cleaned up immediately to avoid spreading

microorganisms throughout the area. Standard Precautions must be used when cleaning up this type of spot. Wear gloves to clean this type of spill. Select a mask, eye protection, and gown if the spill is so large that their is a possibility of splashing onto the housekeeper's uniform or into the housekeeper's eyes or mouth.

Steps of Procedure for Cleaning Blood or Body Substance from a Carpeted Surface

1. Select the appropriate equipment: wet floor sign, cleaning cloths, nonsterile gloves, rubber utility gloves, disinfectant solution, portable extractor, vacuum and solution hose, wand/head, and extraction cleaner.
2. Put on nonsterile gloves. Put on a mask, eye protection, and gown if there is a risk of splashing.
3. Place the wet floor signs around the area.
4. Soak up the blood or body fluid using cleaning cloths or paper towels.
5. Discard the soiled cleaning cloths or paper towels into a trash bag labeled with a biohazard tag.
6. Saturate the soiled carpet surface with disinfectant solution.
7. Allow the disinfectant solution to remain on the carpet for five (5) minutes.
8. If the spill is small, blot up the stain and disinfectant using cleaning rags. Re-clean the spot using spot removal cleaning procedures. Place all soiled cleaning cloths into the trash bag.
9. If the spill is large, use the cleaning procedure for wet extraction.
10. Return the equipment and supplies to the storage area.
11. Clean the portable extractor with disinfectant. Clean the recovery tank and spray with disinfectant.
12. Remove the nonsterile gloves.

Steps of Procedure for Cleaning Blood or Body Substance from a Hard Floor Surface

1. Select the appropriate equipment: nonsterile gloves, two wet-mop heads, two mop buckets with wringers, and disinfectant floor cleaner.
2. Place clean rinse water in one mop bucket.
3. Put on nonsterile gloves.
4. Fill second mop bucket with water.
5. Add germicide/disinfectant solution according to facility policy.
6. Place wet floor signs at each end of the work area.
7. Mop up the spill. Rinse the mop in the clean rinse water and wring it out until the entire spill has been mopped up.
8. Use a clean mop head to wet the mop in the germicide/disinfectant solution.
9. Wring mop head enough to prevent dripping and pooling of the solution on the floor.
10. Mop the floor. Turn the mop over when one side becomes dirty.
11. Empty the dirty water when the area has been completed.
12. Clean the buckets, wringers, and mop cart.
13. Place dirty mop heads in a bag and send to laundry.
14. Remove nonsterile gloves.
15. Wash hands.
16. Return all chemicals and equipment to the proper storage location.
17. Pick up wet floor signs when the area has dried.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written evaluation

for this unit. A score of at least 80 percent indicates you may proceed to the next unit. Check with your clinical supervising staff member for skill testing.

Lesson 3: Floor Cleaning

Activity Sheet

1. Fill in the type of floor surface for each description below.

   a. This floor surface is very hard, comes in squares, and is set together by using grout to fill the spaces between the squares.

   _____

   b. This hard floor surface is laid in sheets or individual blocks, and is very durable and flexible.

   _____

   c. This floor surface is made of loops of yarn secured in a backing. It may be laid over a pad or glued directly to the hard floor underneath. It provides a cushioned walking surface.

   _____

2. List five safety precautions to remember when cleaning floor surfaces.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

Clinical/Laboratory Activities

During your assigned clinical time, pair up with a housekeeper and observe the procedures discussed in this lesson. Once you have observed the procedure, perform the procedure under the supervision of a housekeeper.

Housekeeping Task	Date Observed	Date Performed
1. Top scrub and recoat floor.		
2. Strip and recoat floor.		
3. Spray buff floor.		
4. Clean carpet by using wet extraction.		
5. Clean carpet by using bonnet cleaning method.		
6. Clean carpet by using the dry extraction method.		
7. Clean spot from carpet.		
8. Clean blood/body fluid from a carpeted surface.		
9. Clean blood/body fluid from hard floor surface.		

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: Housekeeping Equipment Rating _____

Comments: _____

_____

Activity Sheet: Routine Cleaning Tasks Rating _____

Comments: _____

_____

Skill Sheet: Empty Trash Rating _____

Skill Sheet: Damp Dust Surfaces Rating _____

Skill Sheet: Clean Glass Surfaces and Mirrors Rating _____

Skill Sheet: Clean Sink Rating _____

Skill Sheet: Clean Toilet Rating _____

Skill Sheet: Complete Detailed Wall Cleaning Rating _____

Skill Sheet: Clean Ceilings, Overhead Lights, and Vents Rating _____

Skill Sheet: Clean Shower Rating _____

Skill Sheet: Clean Bathtub Rating _____

Skill Sheet: Clean Client Bed Rating _____

Skill Sheet: Dust Mop Floor Rating _____

Skill Sheet: Damp Mop Floor Rating _____

Skill Sheet: Clean Blinds Rating _____

Skill Sheet: Vacuum Carpeted Floors Rating _____

Skill Sheet: Clean Overbed Table and Bedside Table Rating _____

Skill Sheet: Clean Furniture Rating _____

Activity Sheet: Floor Cleaning Rating _____

Comments: _____

_____

Skill Sheet: Top Scrub and Recoat Floor Rating _____

Skill Sheet: Strip and Recoat Floor Rating _____

Skill Sheet: Spray Buff Floor Rating _____

Skill Sheet: Clean Carpet by Using Wet Extraction Rating _____

Skill Sheet: Clean Carpet by Using Bonnet Cleaning Method Rating _____

Skill Sheet: Clean Carpet by Using the Dry Extraction Method Rating _____

Skill Sheet: Clean Spot from Carpet Rating _____

Skill Sheet: Clean Blood/Body Fluid from a Carpeted Surface Rating _____

Skill Sheet: Clean Blood/Body Fluid from Hard Floor Surface Rating _____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Unit V

Cleaning Areas Within a Facility

Once the basic cleaning procedures are understood, the housekeeper will be assigned specific areas to be cleaned on a regular basis. Some areas may need to be cleaned several times per day, such as public restrooms. Areas such as client rooms may need to be cleaned daily. Some areas may need to be cleaned weekly, monthly, or once or twice a year. The first lesson will detail the procedures for cleaning the client's room. Lesson two will detail the procedures for cleaning areas of the facility other than client rooms, such as public restrooms, office areas, and elevators.

Unit Lessons

Cleaning Client Rooms

Cleaning Areas of the Facility other than the Client Rooms

Lesson 1:
Cleaning Client Rooms

Objectives:

A. Treat clients' personal items with respect.

B. Complete daily cleaning in client rooms.

C. Make an unoccupied bed.

D. Clean client room upon discharge.

E. Complete deep cleaning of client rooms.

F. Clean isolation rooms.

Key Terms:

- Discharge
- Isolation

A client that must be hospitalized will spend a great deal of time in the room assigned. Maintaining the cleanliness of the room is an important link in preventing the spread of microorganisms from client to client or to staff members. A clean room is also important in helping the client feel better by providing a clean and pleasant environment. For the clients in a long-term care facility, their room is their home. Most elderly residents are in the habit of keeping their personal items in certain places and appreciate keeping their "home" clean and pleasant.

The procedures commonly completed in cleaning a client room on a daily basis will be outlined in this lesson. Additional procedures when more thorough cleaning is required or upon discharge of a client will be reviewed This lesson will include information on how to make a bed that is empty and special techniques used when a client has been in isolation.

Personal Items

When clients are hospitalized or live in a long-term care facility, they rely on the honesty and trustworthiness of their health care providers. Clients will have personal items that they have brought from home to use during their stay. Examples of such personal items include clothing, purse or wallet, jewelry, dentures, hair brushes, combs, books or magazines. In long-term care, clients often bring special pieces of furniture, such as a dresser or rocking chair, that help the room seem like home. They will often have family pictures and special items that bring back memories for the client. These personal items should always be treated with care by the housekeeper while cleaning client rooms.

Personal items from a client's room must never be removed or taken by the housekeeper for any reason. Never discard any items that belong to the client. The housekeeper must also be careful when moving personal items when dusting to keep from accidentally breaking an item. When dusting is complete, return the item where the client left it. Elderly clients in long-term care usually place items in a certain place so they can find it.

Personal items can be accidentally left in the bedding. Use extra caution when stripping a bed to watch for personal items. Dentures, glasses, and writing pens are items commonly found in beds. These items can be very expensive to replace and may cause distress, especially for elderly clients. If an item is found and the client has

already been discharged, turn the item in to the housekeeping supervisor who can then contact the client to return the lost item.

The housekeeper may get to know the residents in long-term care or clients who stay for longer periods in the hospital. Carrying on general conversation with the client is appropriate while cleaning. Resident's will appreciate the housekeeper who notices a new family picture or comments on a new pillow or craft he or she has completed. Be careful not to say anything negative about a resident's personal items.

Daily Cleaning in Client Rooms

Each health care facility will have a specific procedure explaining what is to be cleaned in the client room each day. A clean room helps prevent the spread of microorganisms and provides a pleasant environment for the clients and their family. A thoroughly clean room will provide a positive impression on clients and visitors.

Steps of Procedure for Daily Cleaning of Client Rooms

1. Place the cleaning cart just outside the doorway of the room to be cleaned. Do not block the doorway.
2. Knock before entering the room.
3. Greet the client and any visitors in a friendly, courteous manner. Identify yourself and explain why you are there.
4. If a doctor, nurse, minister, or other clinical person is with the client and they are performing a procedure or having a discussion, excuse yourself and explain that you will come back at a more convenient time.
5. Take only the supplies and equipment needed into the client room.
6. Put on gloves.
7. Dust mop the room.
8. Empty, clean, and reline all trash cans.
9. Check all dispensers (e.g., soap, paper towel, lotion). Clean and refill them as needed.
10. Damp dust the outside surface of all furniture except the client bed. Do not open drawers or disturb the clients' personal items. If it is necessary to move newspapers, magazines, flowers, or other articles to clean, handle them with care and return them to their original location.
11. Spot clean all visible soil from walls, windows, and blinds. DO NOT dust directly over the client.
12. Clean the telephone, including the cord, the dial plate, and the handpiece.
13. Leave your name card by the telephone if this is practiced in your facility.
14. Clean all bathroom fixtures and mirrors.
15. Wet mop the floor.
16. Spot clean visible soil from the room door.
17. Let the client, family, or visitors know that you are finished and thank them. Remind them that the floor will be slippery until it is completely dry and ask them to use caution.
18. Post a wet floor sign at the entrance and leave it there while you clean the next room. By the time you need the sign for the next room, the floor in this room should be dry.
19. Bag all soiled mop heads and cleaning cloths for daily laundering. Use clean ones for the next room.
20. Change the germicidal solution in the mop bucket if it is excessively dirty, or if this is the fourth room for which it has been used. Follow your facility policy for how frequently the mop bucket water should be changed.
21. Note any damaged equipment, walls that require further cleaning, or damaged floor or wall surfaces. Report

these to the housekeeping supervisor so they can be scheduled for repair.

22. Remove gloves and dispose of them in the trash container.
23. Go to the next room.
24. Wash hands before beginning.

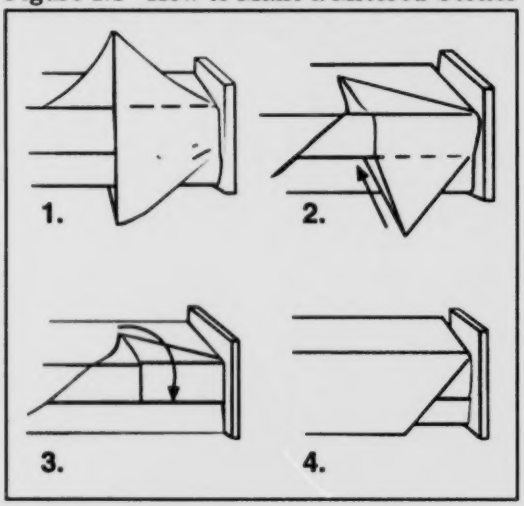
Making an Unoccupied Bed

Housekeepers are not usually responsible, on a daily basis, to make unoccupied beds. However, the housekeeper may be asked to make the bed as part of terminal cleaning.

Steps of Procedure for Making an Unoccupied Bed

1. Wash hands.
2. Gather linens and place in order to be used.
3. Identify and greet client (if client is in room).
4. Identify self.
5. Explain what you are going to do.
6. Wash hands.
7. Put on gloves.
8. Position bed flat, raise to comfortable working height, and lower bed rails.
9. Strip pillowcase off pillow and place pillow out of way.
10. Strip bed and place linen in soiled linen receptacle.
11. Wash and dry mattress, if soiled.
12. Remove and appropriately dispose of gloves.
13. Wash hands.
14. Place mattress pad on bed and pull smooth.
15. Unfold bottom sheet on bed to full length, with bottom hem at bottom edge of mattress.
    NOTE: For fitted sheets, both corners should be secured onto mattress.
16. Tuck bottom sheet under head of mattress and miter corner. Refer to Figure 1.1.

Figure 1.1 - How to Make a Mitered Corner



17. Tuck in bottom sheet along side of bed, working from head to foot.
18. Place draw sheet or protective pad on middle third of mattress (if needed) and tuck in near side only.
19. Place top sheet, halved, on full length of bed, with hem at edge of head end of mattress.
20. Unfold top sheet.
21. Place blanket over top sheet centered on bed and about eight (8) inches down from edge of top sheet.
22. Place bedspread (centered) over top sheet and blanket, leaving enough bedspread to cover pillow at top edge.
23. At foot of bed, miter corners of bottom sheet only and tuck under foot of bed.
24. Gather one side of pillowcase from open end to seamed end.
25. Grasping seamed end of case, allow gathers to fall back over your wrist.
26. Grasp edge of pillow through pillowcase and, holding it securely, work gathered pillowcase down over pillow.
27. Place pillow on near half of bed with open end of pillowcase away from doorway.
28. Go to other side of bed and fold back each piece of linen.

29. Pull mattress pad smooth and tuck under mattress from head to foot.
30. Pull bottom sheet tight (or if using fitted sheet, pull corners down over mattress); tuck under head of mattress; miter corner; and tuck in remainder of sheet from head to foot.
31. Tighten draw sheet; tuck in middle first, then top ⅓, and finally bottom ⅓.
32. Pull top sheet, blanket, and bedspread straight; tuck them under foot of mattress.
33. Miter corners of top sheet, blanket and bedspread together; allow sides to hang free.
34. Place pillow in center of head of bed; pull bedspread over it if bed is to be closed or fanfold all top linens to foot of bed if bed is to be open.
35. Lower bed and return bed crank handle to stored position, if applicable.
36. Raise bed rail as directed by facility.

Cleaning After Discharge

Discharge means the client will not be returning to that particular room. In the hospital setting, discharge occurs when a client is well enough to go home, when the client is transferred to another level of care (such as moving from the intensive care unit to the medical unit or from the orthopedic unit to an extended care unit), or upon the death of a client. A resident might be discharged from long-term care for reasons such as: 1) returning home after recovering from an illness, 2) change in client condition requiring a different level of care, or 3) death. The room is thoroughly cleaned upon discharge of one client and made ready for the next client.

Steps of Procedure for Cleaning a Client Room upon Discharge

1. Empty all trash cans, thoroughly disinfect the trash cans, and replace liners.
2. Dispose of patient care items not taken by the client at discharge. Any personal items found should be labeled and turned in to the housekeeping supervisor to be returned to the client.
3. Remove equipment (e.g., IV pump, suction machine, bedside commode, etc.) and return to the soiled utility room to be disinfected.
4. Strip the bed of linen and place it into a linen bag. DO NOT place soiled linen on the floor. Put the soiled linen in the appropriate place.
5. Dust mop the floor.
6. Disinfect all furniture (including the television, telephone, overbed table, bedside table, overbed lights, etc.) in the room beginning to the right of the door, working your way around the entire room.
7. Wash the entire bed.
8. Visually inspect all wall surfaces for cleanliness. Remove and disinfect any spots on the walls.
9. Visually inspect cubicle curtains and drapes for cleanliness. If soiled areas are found, remove the curtains and bag for laundering. Replace with clean curtains.
10. Clean all fixtures in the bathroom.
11. Check all dispensers. (e.g., soap, paper towel, lotion) Clean and refill them, as needed.
12. Wet mop all hard floor surfaces or vacuum carpeted surfaces.
13. Place wet floor sign at the door until floor is thoroughly dry.
14. Return all furniture to the proper arrangement.
15. Make the bed.

16. Check the condition of, and replenish items left in client rooms. (information cards, bible, telephone book, etc.)
17. Notify the appropriate personnel that the room is clean and ready for the next admission.

Deep Cleaning of Client Rooms

A thorough deep cleaning of all surfaces in the room is scheduled on a rotating basis. Thorough cleaning is not done on a daily basis but is typically scheduled monthly or quarterly. Facility policy will determine how often this type of cleaning is done.

Steps of Procedure for Completing Deep Cleaning of Client Rooms

1. Empty all trash cans, thoroughly disinfect the trash cans, and replace liners.
2. Strip the bed of linen and place it into a linen bag. DO NOT place soiled linen on the floor. Put the soiled linen in the appropriate place.
3. Dust mop the floor.
4. Thoroughly clean all furniture in the room including the television, telephone, overbed table, bedside table, overbed lights, etc.
5. Wash the entire bed.
6. Remove furniture from the client room for floor care.
7. Clean all fixtures in the bathroom.
8. Check all dispensers. (e.g., soap, paper towel, lotion) Clean and refill them, as needed.
9. Completely wipe down plastic shower curtains. Remove and replace fabric shower, cubicle, or window curtains that are not clean. Bag them for laundering.
10. Completely wash all walls, ceilings, windows, blinds and other vertical surfaces including door and window frames and closets.
11. Schedule any necessary room repairs with Maintenance department.
12. Complete thorough floor cleaning.
13. Perform hard floor care cleaning: Top scrub and re-coat floor or strip and re-coat floor as directed by housekeeping supervisor.
14. Perform carpeted floor care tasks. Clean carpet by wet extraction, dry extraction, or bonnet extraction as directed by housekeeping supervisor.
15. Place wet floor sign at the door until floor is thoroughly dry.
16. Return all furniture to the proper arrangement.
17. Make the bed.
18. Check the condition of and replenish items left in client rooms (information cards, bible, telephone book, etc.).

Cleaning an Isolation Room

Although Standard Precautions are used for all clients in a health care facility, some clients may be diagnosed with a contagious disease caused by a microorganism that the spread cannot be prevented by using Standard Precautions only. Transmission-based Precautions need to be added to the cleaning process. In this case the client will be placed on isolation. **Isolation** means that special precautions are used to prevent the spread of that particular microorganism. The client is placed in a private room when possible and additional precautions, such as using a mask, are used. Since the housekeeper is already using standard precautions in performing all procedures to clean a room, few or no changes will be needed. Follow the procedure for deep cleaning or discharge cleaning of a client room and add the following precautions.

- Read the sign posted outside of the client's door and use the type of personal protective equipment indicated.

- Use caution with contaminated trash. Follow facility policy for proper disposal of trash from an isolation room.

- Remove any gloves, gowns, or masks after cleaning the room and dispose of them in the proper waste receptacle immediately after leaving the room.

- Remove cubicle and window curtains for cleaning.

- Bag all cleaning cloths, wet mop heads, and dust mop heads used in the room that are soiled. DO NOT use them in any other area.

- Dispose of water in the mop bucket. Thoroughly rinse out the mop bucket and wringer and fill with clean water and germicide before cleaning the next area.

- After cleaning the room, decontaminate any equipment (mop handles, buckets, plastic bottles, etc.) that is not clean with the appropriate item according to facility policy.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: Cleaning Client Rooms

Activity Sheet

1. Hospitalized clients or residents in long-term care expect _____ from health care staff.

2. A housekeeper must _____ take a personal item from a client's room.

3. Why is it so important to treat client's personal items with respect?

   _____

   _____

4. When cleaning a room at discharge, why is it important to check sheets carefully when stripping them from a bed?

   _____

   _____

5. Define the term discharge.

   _____

6. Define the term isolation.

   _____

7. List five things that are done differently when cleaning the room of a client on isolation precautions.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

Clinical/Laboratory Activities

1. Discuss cleaning in isolation rooms with the housekeeper.

2. During your assigned clinical time, pair up with a housekeeper and observe the procedures discussed in this lesson. Once you have observed the procedure, perform the procedure under the supervision of a housekeeper.

Housekeeping Task	Date Observed	Date Performed
1. Complete daily cleaning of client room.		
2. Make an unoccupied bed.		
3. Clean client room upon discharge.		
4. Deep clean client room.		

Lesson 2:
Cleaning Areas Within a Facility other than Client Rooms

Objectives:

A. Identify areas the housekeeper may be responsible for cleaning.

B. Clean public restrooms.

C. Clean the soiled and clean utility rooms.

D. Clean report room, break rooms, and nurses station.

E. Clean lobby.

F. Clean dining room.

G. Clean office or conference rooms.

H. Clean shower or tub room.

I. Clean elevators.

J. Clean drinking water fountains.

Key Terms:

- Common areas

The housekeeper will have many common areas throughout a health care facility that must be kept neat and clean. **Common areas** are rooms used by many people for a similar purpose. This lesson will describe the procedures that will need to be completed to clean common areas such as public restrooms, dining rooms, conference rooms, elevators, and drinking fountains.

Areas the Housekeeper May be Responsible for Cleaning

The health care facility has many areas besides the client rooms that must be cleaned. Each floor of a hospital may have break areas for the staff, conference or report rooms where shift reports are done, clean and soiled utility rooms, public restrooms, nurses station, and shower or tub room. Other areas throughout the health care facility include lobbies or waiting areas, conference or education rooms, administrative offices, elevators, departments such as the pharmacy, operating rooms, and laboratory. These areas need to be cleaned when they are not busy. For example, the report room will be occupied at change of shifts, the break room will be busier during scheduled break periods. The nurses station is typically very busy when the physicians are making rounds. This would not be a good time to clean around the nurses station. The best times to clean will become obvious to the housekeeper after working in an area for a time. Some of these areas will have very specific cleaning needs and training will be provided by the health care facility. The procedures covered in this unit are common to most health care facilities.

Clean public restrooms and other common areas are an indication to guests of the overall cleanliness of the health care facility. Assuring a clean, odor-free, pleasant environment in the public restrooms and other common areas will leave guests with a positive image of the health care facility.

Steps of Procedure for Cleaning Public Restrooms

1. Place the cleaning cart just outside the doorway of the restroom to be cleaned.
2. Place a sign just outside the restroom being cleaned to notify guests that it will not be available for a short time while it is being cleaned.
3. Check the restroom for guests currently using the restroom. Wait until all guests have finished.
4. Put on gloves and other protective equipment.
5. Clean each toilet and/or urinal thoroughly.
6. Clean each sink.
7. Clean mirrors.
8. Empty, clean, and reline all trash cans.
9. Check all dispensers (e.g., soap, paper towels, lotion, toilet paper). Clean and refill them, as needed.
10. Spot clean restroom walls and doors and walls of the stalls.
11. Dust mop the restroom floor.
12. Damp mop the restroom floor. Pay particular attention to corners and edges.
13. Place a wet floor sign at the door. Leave the sign in place until the floor is thoroughly dry.
14. Remove gloves and other protective equipment.

Steps of Procedure for Cleaning Soiled and Clean Utility Rooms

1. Place the cleaning cart just outside the doorway of the room to be cleaned.
2. Put on gloves.
3. Dust mop the floor.
4. Damp dust surfaces in the room, such as counter tops.
5. Clean the sink if there is one in the room.
6. Check all dispensers (e.g., soap, paper towel, lotion, toilet paper). Clean and refill them, as needed.
7. Clean the hopper (usually only found in the soiled utility room). A hopper is shaped like a large toilet and should be cleaned using the same procedure as a toilet.
8. Empty, clean, and reline all trash cans.
9. Spot clean walls and doors in the room.
10. Damp mop the floor.
11. Place a wet floor sign at the doorway until the floor is thoroughly dry.
12. Remove gloves.

Steps of Procedure for Cleaning Report Room, Break Room, and Nurses Station

1. Place the cleaning cart just outside the doorway of the room to be cleaned.
2. Put on gloves.
3. Dust mop the floor if it is a hard floor surface.
4. Damp dust surfaces in the room such as counter tops, tables, telephone, etc.
5. Clean the sink if one is present in the room.
6. Check all dispensers (e.g., soap, paper towel, lotion, toilet paper). Clean and refill them as needed.
7. Empty, clean, and reline all trash cans.
8. Spot clean walls in the room and the doors.
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.
10. Place a wet floor sign at the doorway of a hard floor surface until it is thoroughly dry.
11. Remove gloves.

Steps of Procedure for Cleaning the Lobby

1. Place the cleaning cart in the lobby but out of the flow *of traffic.*
2. Put on gloves.
3. Dust mop the floor if it is a hard floor surface.
4. Damp dust surfaces in the room such as vinyl-covered chairs, tables, telephone, etc.
5. Clean wood furniture using polish according to facility policy.
6. Pick up magazines and other reading material and replace in magazine racks or arrange neatly on end tables. Dispose of outdated copies or those in poor condition.
7. Empty, clean, and reline all trash cans.
8. Spot clean walls in the room and the doors.
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.
10. Place a wet floor sign at the doorway of a hard floor surface until the floor is thoroughly dry.
11. Remove gloves.

Steps of Procedure for Cleaning the Dining Room

1. Place the cleaning cart in the dining room but out of the flow of traffic.
2. Put on gloves.
3. Empty, clean, and reline all trash cans.
4. Dust mop the floor.
5. Prepare a bucket with germicidal solution according to facility policy.
6. Clean the tops of the tables and the vinyl-covered chairs with a cleaning cloth and germicidal solution.
7. Damp dust or clean any other furniture in the dining room with furniture polish.
8. Damp mop the floor.
9. Place a wet floor sign at all entry ways to the dining room until the floor is thoroughly dry.
10. Remove gloves.

Cleaning Offices and Conference Rooms

Offices contain many personal items of the staff and confidential information about the health care facility or its clients. Remember the importance of confidentiality. There may be papers or mail on the top of desks. Do not touch anything on the desk. The housekeeper may want to check with the person who occupies the office to decide a convenient time to clean. Offices are often cleaned in the evening when the staff is not present. Be sure the conference room is not in use or scheduled for use soon before cleaning.

Steps of Procedure for Cleaning an Office or Conference Room

1. Place the cleaning cart just outside the doorway of the room to be cleaned.
2. Knock on the door to be sure the room is not in use or that it is a convenient time to clean.
3. Put on gloves.
4. Empty, clean, and reline all trash cans.
5. Dust mop the floor if it is a hard floor surface.
6. Damp dust all surfaces in the room.
7. Clean wood furniture using furniture polish according to facility policy.
8. Spot clean walls and doors in the room.
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.
10. Place a wet floor sign at the doorway if a hard floor surface until the floor is thoroughly dry.
11. Remove gloves.

Cleaning the Shower or Tub Room

Long-term care facilities often have common rooms where residents go for a bath or shower. It can be very busy throughout the day. A shower room is less common in the hospital setting since many rooms have individual shower and bath. Some hospitals may still have a shower or tub room where clients can go to shower or bathe. The shower and bath area is a warm and moist environment providing an excellent place for the growth of microorganisms. Cleaning these areas thoroughly is very important.

Steps of Procedure for Cleaning the Shower or Tub Room

1. Place the cleaning cart just outside the doorway of the shower or tub room.
2. Put on gloves.
3. Empty, clean, and reline all trash cans.
4. Clean tub.
5. Clean shower.
6. Clean sink (if present).
7. Clean mirror (if present).
8. Clean toilet (if present).
9. Spot clean walls and doors in the room.
10. Damp mop the floor.
11. Place a wet floor sign at the doorway if the floor is a hard surface until the floor is thoroughly dry.
12. Remove gloves.

Cleaning Elevators

Elevators are used by guests, clients, and staff members. Elevators are a high traffic area with dirt and dust accumulating easily. Finger smudges collect easily on the walls. Clean elevators will leave a positive impression on those who use them and reflect positively on the health care facility.

Steps of Procedure for Cleaning Elevators

1. Select the appropriate equipment. Spray bottle with all-purpose cleaner, cleaning cloths, putty knife, gum remover, vacuum, step ladder, service key.
2. Call elevator to the floor on which you are working. Using the service key, open the service panel box and turn the service switch to the "on" position.
3. Place the step ladder in the center of the elevator.
4. Put on gloves.
5. Remove the plastic cover from the lights in the top of the elevator.
6. Clean the entire ceiling using the all-purpose cleaner and cleaning cloth.
7. Clean the walls of the elevator using the all-purpose cleaner and cleaning cloth.
8. Dry polish the stainless steel using a dry cleaning cloth before the solution dries.
9. Check the carpet for any stains or gum. If gum is found, apply gum remover and remove the gum using a putty knife.
10. Vacuum the carpet in the elevator. Dust mop followed by damp mopping if it is a hard floor surface.
11. Remove gloves.
12. Turn the service switch to the "off" position to return the elevator to service.
13. Return equipment to storage.

Cleaning Drinking Water Fountains

Drinking water fountains are used by guests, clients, and staff members. Water fountains need to be disinfected to avoid the spread of germs. They can also become dusty and smudged with fingerprints.

Clean water fountains will leave a positive impression on those who use them and reflect positively on the health care facility.

Steps of Procedure to Clean Drinking Water Fountains

1. Place the cleaning cart next to the water fountain.
2. Put on gloves.
3. Apply germicidal solution to the fountain head, bowl, handle, etc.
4. Use a clean cloth to wipe all parts of the fountain including the exterior.
5. Operate the fountain briefly to flush any of the germicidal solution out of the fountain head.
6. Select stainless steel polish. Polish all metal areas of the unit. The fountain should shine and show no water marks.
7. Remove gloves.
8. Report any poor operation of the fountain to maintenance department.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written unit evaluation. A score of 80 percent indicates that you may proceed to the next unit. Check with your clinical supervising staff member for skill testing.

Lesson 2: Cleaning Areas Within a Facility

Activity Sheet

1. List five areas besides client rooms that the housekeeper will be responsible for cleaning.

   a. _____

   b. _____

   c. _____

   d. _____

   e. _____

2. When planning your schedule for the day, when should you plan to clean areas such as the nurses station, conference rooms, or offices?

   _____

   _____

   _____

Laboratory/Clinical Activities

1. Discuss with the housekeeping staff how they schedule their day to avoid cleaning common areas during busy times? Write what you learn in a one or two paragraph paper to be turned in to your instructor.

2. During your assigned clinical time, pair up with a housekeeper and observe the cleaning of the following areas listed in the table on the next page. Once you have observed the procedure, perform the procedure under the supervision of a housekeeper.

Housekeeping Task	Date Observed	Date Performed
1. Clean public restrooms.		
2. Clean soiled and clean utility rooms.		
3. Clean report room, break room, and nurses station.		
4. Clean lobby.		

Housekeeping Task	Date Observed	Date Performed
5. Clean dining room.		
6. Clean office or conference rooms.		
7. Clean shower or tub room.		
8. Clean elevators (if available).		
9. Clean drinking water fountain.		

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: Cleaning Client Rooms Rating _____

Comments: _____

_____

Skill Sheet: Complete Daily Cleaning of Client Rooms Rating _____

Skill Sheet: Make an Unoccupied Bed Rating _____

Skill Sheet: Clean Client Rooms upon Discharge Rating _____

Skill Sheet: Complete Deep Cleaning in Client Rooms Rating _____

Activity Sheet: Cleaning Areas of the Facility other than Client Rooms Rating _____

Comments: _____

_____

Skill Sheet: Clean Public Restrooms Rating _____

Skill Sheet: Clean Soiled or Clean Utility Room Rating _____

Skill Sheet: Clean Report Room, Break Room, and Nurses Station Rating _____

Skill Sheet: Clean Lobby Rating _____

Skill Sheet: Clean Dining Room Rating _____

Skill Sheet: Clean Office or Conference Rooms Rating _____

Skill Sheet: Clean Shower or Tub Room Rating _____

Skill Sheet: Clean Elevator Rating _____

Skill Sheet: Clean Drinking Water Fountain Rating _____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Unit VI

Laundry

Health care facilities handle their laundry operations in different ways. The laundry may be done by a completely different staff than the housekeeping staff. Some facilities train their staff in both housekeeping and laundry procedures. Professional linen services also provide laundry services to some facilities.

This unit will cover how to perform laundry procedures using safe work habits. Like any other area of the health care facility, the staff must understand the spread of microorganisms and how to use proper body mechanics. It is also important to learn about the chemicals that the laundry workers will use on a regular basis and how to handle them safely.

This unit will also cover the basic skills a person working in laundry will need to know such as sorting, washing, drying, and folding laundry.

Finally the person working in laundry must return the laundry to the units or client rooms for use.

Unit Lessons

Safety

Laundry Procedures

Distributing Laundry Items and Cleanup

Lesson 1: Safety

Objectives:

A. Identify when personal protective equipment should be used in the laundry.

B. Use proper body mechanics when lifting laundry.

C. Identify hazards in the laundry room.

D. Handle chemicals in the laundry carefully.

E. Use laundry chemicals according to directions.

Key Terms:

- Industrial strength
- Laundry detergent
- Fabric softener
- Static
- Neutralizer rinse
- Bleach
- Emulsifier

Using the Basic Principles of Standard Precautions

Linens and clothing will arrive in the laundry room with a collection of human body fluids. Linens may be soiled with blood, urine, or feces. It is essential that the laundry worker understand Standard Precautions as discussed in Unit III, Lesson 1 and always select the appropriate personal protective equipment. Review the following situations when the laundry worker will need personal protective equipment.

- Always wear gloves when sorting soiled laundry. Laundry soiled with blood or other body fluids may not always be placed in a biohazard bag to warn the laundry worker. Use caution when emptying any bag of soiled linens.

- Always wear a gown when sorting laundry heavily soiled with blood or body fluids. This will prevent contamination of the worker's uniform.

Proper Body Mechanics

Laundry workers will be required to lift heavy items in carrying out their duties. Proper body mechanics must be used at all times to prevent injury. Bags of laundry can be very heavy. Remember the following points when handling heavy loads in the laundry area.

- Push rolling carts of laundry whenever possible.

- Squat, bending at the knees. Keep the back straight; do not bend at the waist to pick up a bag of laundry. This enables the strong muscles of the legs to lift the bag.

- Hold bags of laundry close to the body when carrying them. Protective clothing should be worn. Remember, according to the basic principles of medical asepsis, clean or soiled linens should not be placed directly against the uniform.

- If the load is too heavy, do not try to lift it yourself. Ask someone to help.

- Do not twist your back when moving a laundry bag; change the position of your feet.

Safety Hazards

Laundry workers must take precautions to protect themselves against safety hazards in the laundry area. Multiple dryers running in the enclosed space of the laundry room can cause this area to become very warm and the worker can become overheated. The laundry area should be well ventilated, particularly during hot, summer weather. The laundry worker should take breaks on a regular basis according to the policy of the facility. Wash hands before eating or drinking. Drink liquids while on break to maintain adequate hydration throughout the work day. If overheating occurs, notify the supervisor and go to a cooler area.

Sharp objects that have accidentally been left in the linens when sent to the laundry room can also be a safety hazard. A scalpel blade or suture needle might get into the linens from the emergency room or operating room. An IV needle could accidentally be left in the bed when procedures must be completed very quickly. Always be aware of the possibility of a sharp object being left in the linens. Handle linens carefully to avoid injury.

Equipment such as dryers, washer, or irons may become very hot when in use. Always use caution not to brush up against these items when working in the laundry area. Some laundry may be washed in very hot water to disinfect and kill any microorganisms. Be cautious when working around the washing machines.

Many automatic machines in the laundry area, such as the washer, dryer, towel folder, and sheet folder have many moving parts. Hands should never be placed into a machine that is running. If a jamb has occurred, turn the machine off and unplug it before removing the jamb.

Laundry may be sorted into piles on the floor or bags of soiled linens may be lying at the foot of the laundry shoot. Stay alert when walking in the laundry area to keep from tripping.

Handling Chemicals

The laundry worker will work with hazardous chemicals on a daily basis. Each chemical will have a Material Safety Data Sheet (MSDS) to explain the hazards the worker needs to be aware of when handling a specific chemical. Chemicals can burn the skin and eyes. The laundry worker needs to be familiar with the location of the MSDS's and how to handle the common chemicals used in the laundry.

Goggles, gloves, and apron should be worn while changing out machines from one chemical to another. Do not mix chemicals; the fumes can become toxic.

Common chemicals include laundry detergent, fabric softener, neutralizer rinse, bleach, and emulsifiers. These chemicals will often be found in facility laundry rooms in an industrial strength. **Industrial strength** means that the chemicals are more concentrated than the ones used in most homes. Smaller amounts of industrial strength chemicals will be required to complete the job. Add only the amount recommended by the manufacturer. If more than the recommended amount is added, soap may not rinse out thoroughly from the linens or the chemical may not work properly.

- **Laundry detergent** is a chemical used to clean dirt from clothes.
- **Fabric softener** is a chemical used to make the clothes feel soft rather than stiff and coarse after being washed. Fabric softener often includes a chemical that will help prevent static in clothing. **Static** is a chemical attraction of a piece of clothing to another or to the person wearing it. Little sparks will also be noticed when clothing with static is pulled away from one another. These sparks are dangerous for clients who need to wear an oxygen mask or nasal cannula to help them breathe easier.
- **Neutralizer rinse** is a chemical that returns the normal pH (acid or base) to the clothes. A rinse helps to make certain all the soap has been removed from the clothes.
- **Bleach** is a hypochloride solution that helps remove stains from white clothing and linens. Bleach cannot be used on colored clothes or they will fade. Special bleaches are made for colored clothes to help remove hard to remove stains from colored clothing. Bleach has a strong odor when it is concentrated and can be very dangerous when added to other chemicals that are not compatible.
- **Emulsifiers** are used before detergent and bleach to make a stain easier to wash out.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 1: Safety

Activity Sheet

1. Define the following terms:

   a. Industrial strength: _____

   _____

   b. Laundry detergent: _____

   _____

   c. Fabric softener: _____

   _____

   d. Static: _____

   _____

   e. Neutralizer rinse: _____

   _____

   f. Bleach: _____

   _____

   g. Emulsifier: _____

   _____

2. Fill in the blanks indicating proper body mechanics for the following situations.

   a. _____ rolling carts of laundry whenever possible.

   b. Squat, bending at the _____ and keeping the _____ straight when lifting a heavy bag of laundry.

   c. If the load is too heavy, _____ _____ lift it yourself.

   d. Do not _____ your back to move a laundry bag.

3. List four possible hazards in the laundry room.

   a. _____

   b. _____

   c. _____

   d. _____

Clinical/Laboratory Activities

1. Go to the clinical site and observe the laundry workers as they perform the duties for the day. Observe for the following:

   a. When do the laundry workers use personal protective equipment?

   _____

   _____

   b. The use of body mechanics. Did you observe any poor body mechanics? If yes, what should the worker have done to use proper body mechanics?

   _____

   _____

   _____

2. Locate the MSDS book for the laundry room.

3. Look up the MSDS for the following chemicals commonly used in the laundry room. Write what each of these are used for and what safety precautions should be used when working with these chemicals.

   a. Laundry detergent: _____

   _____

   b. Bleach: _____

   _____

   c. Stain removers: _____

   _____

Lesson 2:
Laundry Procedures

Objectives:

A. Collect personal clothing for laundering.

B. Collect soiled linens from the nursing units.

C. Sort laundry.

D. Remove stains from laundry items.

E. Wash laundry.

F. Dry laundry.

G. Fold or hang laundry.

H. Identify clothing or linens in need of repair or replacement.

I. Launder items from an isolation room.

Key Terms:

- Sort
- Fade
- Stain
- Test area
- Lint
- Inseam

The main job in the laundry is to receive, wash, dry, fold, and return the laundry for a health care facility. Laundry may include dirty clothes from clients, linens used on the beds and for bathing, cleaning cloths, mop heads, and other washable items such as sterile instrument wraps. In this lesson the major procedures needed on a daily basis will be discussed, including sorting laundry, stain removal, washing, drying, and folding laundry.

Collecting Laundry

The first step in the laundry process is to collect the clothes and linens to be washed. The exact procedure for doing this will differ in each facility. Laundry personnel may be responsible for going to soiled linen rooms to pick up the soiled laundry from the nursing units. In other cases, nursing or other staff are responsible for getting the soiled laundry to the laundry room. Some facilities may have a laundry chute where bags of soiled laundry are placed. Soiled laundry goes through the chute directly to the laundry room.

In long-term care, residents purchase and wear their own clothing. Many residents will have their personal laundry done in the facility laundry. Some families will prefer to do the laundry for their loved one. Each facility will have a way of telling laundry staff which residents have their laundry done by the facility and which is done by the family. Be sure to only pick up personal laundry that is to be done by the facility.

Steps of Procedure for Collecting Personal Clothing for Laundering

1. Wash your hands.
2. Select the appropriate laundry bag and non-sterile gloves.
3. Put on the non-sterile gloves.
4. Knock before entering the residents' room. Explain that you are there to pick up soiled laundry.
5. Pick up the soiled laundry from each residents' closet or wherever soiled laundry is placed in a particular facility.
6. Place the soiled laundry into the laundry bag.

7. Go to each room to pick up the soiled laundry. Personal laundry will usually be picked up daily.
8. Place the bags of soiled laundry into a laundry cart when all the personal laundry on a unit has been picked up.
9. Push the laundry cart to the laundry room.
10. Remove the non-sterile gloves.
11. Wash hands.

Laundry personnel may also be responsible for picking up soiled linens from the facility. Health care staff should have placed the laundry into laundry bags and tied them securely.

Steps of Procedure for Collecting Soiled Linens from the Nursing Units

1. Find a laundry cart for soiled linens.
2. Wash hands.
3. Put on non-sterile gloves.
4. Push the laundry cart to the room where the soiled linens have been placed.
5. Load all bags of soiled linen into the laundry cart.
   NOTE: Remember to use good body mechanics when lifting heavy bags of linens.
6. Push laundry cart to the laundry room.
7. Remove non-sterile gloves.
8. Wash hands.

Sorting Laundry

Once the laundry has arrived in the laundry room, the laundry staff's job begins. Laundry must first be sorted. **Sorting** means to separate clothes into groups that are similar colors and similar types of fabric. Different types of fabrics need to be washed in different water temperatures with different detergents. For example, all the sheets are white and made of the same fabric so they can all be washed together. Clothes that are dark colors such as black, brown, or gray would be washed together. Clothes that are red have a tendency to fade and should be washed together. **Fade** means that the color is released from the fabric into the water and the color is then picked up by the other clothes causing them to change colors. Each facility will have groups of clothing/linens that are to be sorted and washed in separate loads. These groups may include flat sheets, towels and wash cloths, blankets, lap robes, mops and rags, dark colored personal clothes, and light colored personal clothes.

When sorting clothes the laundry worker must remember possible health risks. The laundry from a hospital or long-term care facility will often be soiled with body fluids such as urine, blood, or feces. Use of standard precautions is essential. Non-sterile gloves and a gown should be worn when sorting clothes. If the item is heavily soiled with blood or feces and needs to be rinsed before being washed, a mask with a face shield or a mask and goggles should also be worn because of the chance of splashing.

Another safety hazard when sorting clothes is the possibility that a sharp item such as a needle, scalpel blade, or suture needle may have accidentally been lost in the linens. Use extreme caution when emptying laundry bags to avoid accidentally puncturing a hand.

When sorting laundry, check pockets of personal clothing for personal items such as glasses, dentures, or jewelry. These items should be placed in a bag and labeled with the name of the person to whom it belongs. Also watch linen bags that have bed sheets for the possibility of dentures, watches, or glasses that might have been left in the bed by the client. These may be bundled in the

rolled sheet or might have fallen loose into the bottom of the laundry bag. These items can be very expensive for the client to replace and watching for these items can help build positive relations with family members.

As the laundry worker sorts the laundry, observe the clothes or linens for stains that need to be pre-treated. Some stains cannot be removed after the item has been washed and dried once. Set clothing or linens aside that need to be treated to remove stains.

Steps of Procedure for Sorting Laundry

1. Put on non-sterile gloves and a gown.
2. Empty the bag of laundry.
3. Place the items into separate barrels labeled with the major categories of clothes/linens or sort into piles.
4. Observe each item for stains that need to be pre-treated or for repairs that need to be completed.
5. Pre-treat stains. (See separate procedure for treating stains.)
6. Rinse heavily soiled items to remove most of the body substance.
7. Sort all bags of clothing.
8. Weigh the linen cart of sorted, soiled laundry.
9. Push carts, baskets, or barrels of sorted laundry to the washing machine area.
10. Remove gloves.
11. Wash hands.

Treating Stains

A **stain** is a substance that has caused a color change in fabric of clothing or linens. Examples of common stains in a health care facility include: blood, food, medicines, feces, or make-up. For the linen or clothing to continue to be useable, the stains should be removed. Stain removal is easier if the stain is identified and treated quickly.

The first step in stain removal is to determine the cause of the stain, if possible. Different stain removal procedures and chemicals will be used depending on the substance that caused the stain. The type of fabric will also determine which process or chemical can be used. Once the type of stain, the type of fabric, and the proper chemical or process has been selected, follow the label directions on the chemical.

Steps of Procedure for Removing Stains from Laundry Items

1. Put on gloves and a gown.
2. Take the garment to a well-lit area.
3. Examine the stain to determine what substance caused it, if possible.
4. Determine the type of fabric and how that fabric will react to the cleaning agent.
5. Apply the cleaning agent on a test area. A **test area** is a location that is hidden to determine how the fabric will respond to the cleaning agent.
6. Apply the cleaning agent with a squeeze or spray bottle while placing the stained portion over a pad or clean cloth if the fabric is a delicate fabric.
7. Allow the cleaning agent time to penetrate the stained area thoroughly. Avoid excessive friction, especially on silk and rayon fabrics.
8. Rinse the fabric thoroughly with water to remove the cleaning agent.
9. Place the garment in the proper pile for laundering.
10. Remove gloves and gown.
11. Wash hands.

Washing Laundry

Washing laundry means removing soil from clothes and linens. Chemicals are added to the laundry to help loosen and remove the soil from the linens. It is important to observe safety practices when washing laundry. The laundry that will be placed into the washer may be contaminated with body fluids. Standard precautions must be practiced at all times. Wear gloves and a gown when loading the washers.

Washers have many moving parts. Do not open doors when moving parts are still working. Many washers with safety devices keep the door from opening until all moving parts have stopped.

When adding laundry detergent, bleach, stain remover, fabric softener or rinse, be sure to follow label directions.

Steps of Procedure for Washing Laundry

1. Wash hands.
2. Put on non-sterile gloves and a gown.
3. Load pre-sorted and spot-stained laundry into the washing machine.
4. Place laundry detergent into the washing machine according to facility policy. If the washing machine has a chemical injection system, set the proper program for the load of clothes.
5. Close the washer door and be sure it has latched (in a commercial machine).
6. Select the load size (on a standard machine).
7. Select the water temperature (on a standard machine).
8. Press the start mechanism.
9. Remove gloves.
10. Wash hands.

Drying Laundry

After the laundry has been washed, it must be dried. The most common way to dry laundry is to place the clothes and/or linens into a dryer. Some types of fabric cannot be placed in the dryer because the heat of the dryer will cause the fabric to shrink. These clothes must be hung up or laid flat to dry. Some fabrics, such as cotton, can be dried on high heat. Other fabrics must be dried on warm or cool heat settings.

Remember safety when using the dryer. The dryer has moving parts. Be sure the dryer has come to a complete stop before opening the door to check or remove linen. Dryers have lint traps to collect lint. **Lint** is small particles of the fabric that have come loose during the washing and drying process. The lint traps must be emptied between each load of laundry. If lint is allowed to accumulate, it can cause sparks and a fire may occur. When a dryer has been set on a high heat setting the laundry will be very warm. All dryer loads must have a five minute cool down time before unloading to avoid a possible burn.

Steps of Procedure for Drying Laundry

1. Open the door on the washing machine.
2. Remove the laundry from the washing machine.
3. Place the laundry into a rolling cart or clothes basket.
4. Place the laundry into the dryer.
5. Remove the lint from the lint trap.
6. Set the load size and the heat setting on the dryer.
7. Press the start button.
8. Check the laundry periodically to determine if they are dry.
9. Remove laundry from the dryer as soon as they are dry to touch.
10. Iron or fold the laundry and return to the appropriate area of the facility.

Folding and Hanging Laundry

To avoid wrinkles in the clothes and linens that have just been laundered, fold or hang the clothing immediately. Flat items such as towels, sheets, wash clothes, and bed protectors will be folded and placed onto a linen cart to be taken back to the units of the facility. Large laundry facilities may have automatic folding machines. These machines finish drying, press, and fold items such as sheets and towels. This saves time and provides an exact fold each time. The facility will provide training on these machines. Smaller facilities will have the staff fold the flat items.

Personal clothing for clients must be hung on hangers or folded. Each clients' clothing will be labeled with their name. As soon as the laundry has been removed from the dryer, the clothes should be hung on hangers. The top button should be buttoned on shirts to keep the shirt from sliding off the hanger. Zippers in the top of blouses or dresses should be zipped to keep the item from sliding off the hanger. Pants should be hung with the inseams together. The **inseam** is the inside seam of each pant leg that goes from the bottom of the leg to the center of the pant. Hanging items neatly will maintain a wrinkle-free appearance.

Each facility will have a slightly different method of returning personal laundry to the resident rooms. Generally the hanging clothes will be placed in alphabetical order on a rolling garment rack which will be rolled to the unit.

Underclothing, sweat pants, and some other clothing items may be folded rather than hung. These should be placed in piles according to resident name.

While folding linens or clothes, observe for tears or other repairs that are needed. Separate these items from those being folded to return to the units. These items will be repaired before they are returned to the unit or discarded if they are beyond repair.

Launder Items from Isolation Room

The procedures for laundering items from isolation rooms is the same as other laundry procedures, but with the following additional steps. The appropriate personal protective equipment must be worn: non-sterile gloves and gown.

1. Put the whole bag into the washing machine if the bag is of washable (biodegradable) material. If the bag is not washable, put the bag into the machine and peel back the bag from the laundry, leaving the laundry inside the machine.

2. Run the laundry through the wash cycle two times.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

After you have completed the activity sheets, you may take the written evaluation for this unit. A score of at least 80 percent indicates you may proceed to the next unit.

Lesson 2: Laundry Procedures

Activity Sheet

1. Define the following terms:

   a. Sort: _____

   _____

   b. Fade: _____

   _____

   c. Stain: _____

   _____

   d. Test area: _____

   _____

   e. Lint: _____

   _____

   f. Inseam: _____

   _____

2. In each of the following situations, list the personal protective equipment that should be used and describe why it is necessary. If personal protective equipment is not necessary, describe why not.

   a. Placing clean laundry from the washing machine into the dryer.

   _____

   b. Collecting personal laundry from the client rooms to the laundry room to be washed.

   _____

   c. Folding laundry that has been removed from the dryer.

   _____

d. Sorting laundry in preparation for washing.

_____

e. Placing laundry into the washing machine.

_____

f. Treating a stain.

_____

g. Laundering items from isolation areas.

_____

Clinical/Laboratory Activities

1. In the laboratory area, sort a pile of clothing and linens into appropriate groups for laundering.

2. In the laboratory area, take a piece of red cloth. Place this red cloth into a sink filled with very warm water. Move the cloth in the water to simulate a washing machine. What color is the water? Add a piece of white cotton cloth. Allow the white cloth to stay in the water for 15 minutes. Rinse the pieces of cloth. Is the red still as bright as it was when you started? What color is the white cloth?

3. Go to a local store and read the labels on several stain removers. For each stain remover write:

   a. The name of the stain remover
   b. What type of stains it will remove
   c. What type of fabrics it can be used on
   d. Precautions that should be taken when using this stain remover

4. In the laboratory area, look at various stains in clothing or linens. Try to determine the cause of each stain. From the stain removers provided, determine which stain remover you think will remove the stain. Following the label directions, attempt to remove the stain.

5. In the laboratory area, practice folding towels, sheets, and wash cloths. Watch for clothing or linens in need of repair or replacement.

6. During your assigned clinical time, pair up with a laundry worker and observe the following skills. Once you have observed the skill, perform the skill under the supervision of a housekeeper.

Housekeeping Task	Date Observed	Date Performed
1. Collect personal clothing for laundering.		
2. Collect soiled laundry from the nursing units.		
3. Sort laundry.		
4. Remove stains from laundry items.		
5. Wash laundry.		
6. Dry laundry.		
7. Fold or hang laundry.		
8. Launder items from an isolation room.		

Lesson 3:
Distributing Laundry Items and Cleanup

Objectives:

A. Restock clean linen closet/cart.

B. Return personal clothing to client room.

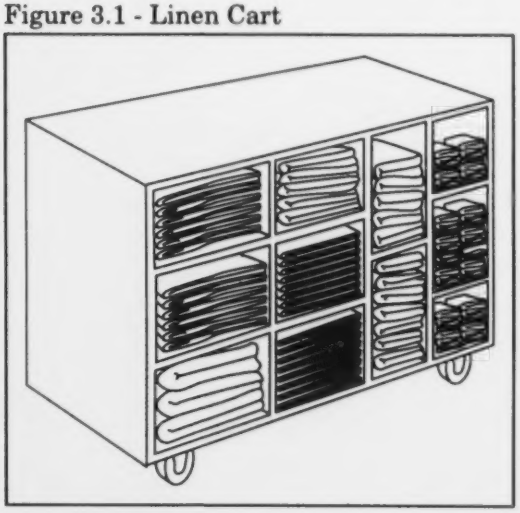
C. Clean laundry room.

Restocking Clean Linen

Once the laundry has been sorted, washed, dried, and folded, it must be returned to the units in the health care facility. It is essential that the laundry remain as it is returned for use on the units.

Linens are stored on the units either on linen carts or in a linen storage room. Linen carts are large carts on wheels with cubicles for each type of item needed on the unit, as shown in Figure 3.1. Linen carts are filled in the laundry room with clean linens and then pushed to the unit where it is needed. The linen cart currently on that unit is taken to the laundry room to be restocked. As linens are folded in the laundry room, they are placed in the appropriate cubicle on the cart.

Figure 3.1 - Linen Cart



In some facilities the linens are stored in a linen closet. Linens must be placed on a cart and taken to the linen closet where the items are placed in the closet for use by the staff. Each unit will have a designated number of towels, wash cloths, sheets, and pillowcases needed each day for the activities of that particular unit. It is the responsibility of the laundry staff to be sure the linen closets have sufficient linens for each day's work.

When transporting linens from the laundry room to the unit, the linens must remain covered. Clean linens must avoid contamination with microorganisms as the linen cart is pushed through the facility. Most linen carts have a plastic cover that comes down over the linens and zips shut. This is a convenient way to maintain cleanliness and still be readily accessible to the staff. Linen carts that are used just for transportation to the linen closet must also be covered while moving through the facility.

Returning Personal Clothing

Personal clothing laundered in the facility laundry will be hung on hangers and placed on a hanging rack or folded and placed in piles for each resident. Like the linens on the linen cart, personal laundry must also be covered while it is transported from the laundry room to the resident rooms. Stop at each residents' door and knock before entering. Place the laundry into his or her closet.

Cleaning the Laundry Room

Maintaining a clean environment that is free from microorganisms is important to prevent their spread throughout the facility. Each facility will have a specific policy for cleaning the laundry room. Some basic concepts will apply to all facilities.

The carts used to pick up soiled laundry from the units may become contaminated with blood or body fluids. Any obvious soiling of the cart should be cleaned immediately with a disinfectant solution. Since this is a body fluid, gloves must be worn when cleaning the cart. The laundry carts will be sprayed with disinfectant and washed daily with a clean cloth. Barrels or baskets used for sorting soiled laundry must be cleaned after each use.

All surfaces in the laundry room need to be cleaned daily with a disinfectant solution. Surfaces might include table tops and counter tops. All carts or baskets used for moving laundry from one area to another will need to be cleaned daily. Linen racks for personal clothing and linen carts for clean folded laundry should be cleaned before placing clean laundry on them.

All germicidal chemicals must be used in the proper dilution and gloves must be worn when cleaning with them. Be sure to leave the germicidal/disinfectant on the surface as long as the label directs to assure complete disinfection. Some germicidal/ disinfectant may be required to air dry to work effectively. Other situations may require the solution to be wiped dry to avoid spotting on the surface of the item being cleaned.

Test Your Knowledge: Complete the following activity sheet to test your knowledge and understanding of the materials you have studied in this lesson.

Lesson 3: Distributing Laundry Items and Cleanup

Activity Sheet

1. Describe a linen cart exchange system.

2. Describe the procedure for restocking a linen room on a client unit.

3. Why is it important to keep the linens and clothing covered when taking clean laundry back to the facility units?

4. How often are the linen carts and surface areas in the laundry room cleaned?

Clinical/Laboratory Activities

1. Observe the process for returning linens to the health care facility units.
2. Describe the cleaning activities you observe on a clinical day in the laundry area.

Unit Checklist

Student Name_____ Overall Unit Rating _____

Activity Sheet: Safety Rating _____

Comments: _____

_____

Activity Sheet: Laundry Procedures Rating _____

Comments: _____

_____

Skill Sheet: Collect Personal Clothing for Laundering Rating _____

Skill Sheet: Collect Soiled Linens from Nursing Units Rating _____

Skill Sheet: Sort Laundry Rating _____

Skill Sheet: Remove Stains from Laundry Items Rating _____

Skill Sheet: Wash Laundry Rating _____

Skill Sheet: Dry Laundry Rating _____

Skill Sheet: Launder Items from an Isolation Room Rating _____

Activity Sheet: Distributing Laundry Items and Cleanup Rating _____

Comments: _____

_____

Written Unit Evaluation Score _____

Additional Comments: _____

_____

_____

Teacher Signature _____ Date _____

Student Signature _____ Date _____

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. The housekeeper participates in providing quality care by:

   a. Greeting each client or visitor at the front door.
   b. Becoming the most important person on the health care team to the client.
   c. Providing a clean, neat, odor-free first impression to clients and visitors.
   d. Spending as much time as possible in each client's room discussing his or her illness.

2. The mission of the housekeeping department includes two goals. They are to provide:

   a. A clean, odor-free environment and to reduce the spread of microorganisms.
   b. Pleasant customer service and to be sure call lights are answered quickly.
   c. Fresh paint each year and maintain hospital equipment in good working order.
   d. Clean floors and to change bed linens daily.

3. The job duties of the housekeeper include:

   a. Answering call lights, transferring clients, and moving clients to new rooms.
   b. Taking clients to X-ray, walking specimens to the lab, and making beds.
   c. Picking up diet trays, cleaning up spills, and taking vital signs.
   d. Vacuuming carpets, mopping floors, and dusting furniture.

4. The purpose of the job description is to:

   a. Discourage an applicant from applying for a job.
   b. Tell the applicant what jobs are available in the facility.
   c. Give the housekeeper and excuse for not helping other team members.
   d. Tell the housekeeper what skills he or she is expected to do as part of the job.

5. Housekeepers are employed in a variety of settings. Which of the following is a health care facility where a housekeeper might be employed?

   a. Hotel
   b. Department store
   c. Outpatient clinic
   d. Office building

6. Which of the following departments in a hospital might a housekeeper be assigned to clean?

   a. Maintenance department
   b. Intensive care department
   c. Grounds keeping department
   d. Dietary department

7. You are cleaning a client room. You observe a roach and some ants. You have never seen this problem before and do not know what to do. Who should you contact?

   a. The physician
   b. The charge nurse
   c. The patient's family
   d. The unit housekeeping supervisor

8. As part of the employment process, a new employee might expect:

   a. A police officer to come to his or her home to interview him or her.
   b. A vaccination against smallpox to be administered.
   c. A human resource representative to call his or her parents to verify his or her age.
   d. A physical exam including TB skin testing and a drug test to be ordered.

9. During your orientation you have forgotten exactly how to do a task your supervisor taught you last week. What can you do to correctly perform the task?

   a. Review the steps of procedure in the procedure manual.
   b. Read about the procedure in a housekeeping textbook.
   c. Contact the hospital administrator for instructions.
   d. Ask the patient what other housekeepers do.

10. Because having good personal hygiene is important for a housekeeper, he or she should:

    a. Wear long acrylic nails.
    b. Use deodorant each day.
    c. Take a bath twice a week.
    d. Brush his or her teeth once a week.

11. Your supervisor Mary has delegated a task to you. You believe you understand almost everything she told you except one part. Which response is most appropriate?

    a. Ask the charge nurse when you get to the unit what she thinks your supervisor meant.
    b. Demand that the supervisor write down the instructions in detail.
    c. Respectfully ask your supervisor to clarify the area you are uncertain about.
    d. Think about the instructions carefully and then do what you think.

12. Mark is a good team member if he is able to:

    a. Complete his work then take his break.
    b. Focus on the differences between members of the housekeeping team.
    c. Do the work assigned to him and then offer to help other team members.
    d. Talk with other housekeepers about a problem with another housekeeper.

13. Becoming a member of a professional organization for housekeepers would provide:

    a. Opportunities for continuing education and the chance to share with other housekeepers.
    b. The chance to discuss housekeeping problems with all members of the health care team.
    c. Lawyers to write laws in favor of housekeepers.
    d. The chance to get a college degree.

Match the term in Column A with its correct definition in Column B.

COLUMN A		COLUMN B
_____ 14.	Assigning work to workers most suited for the job.	a. Cross-training
_____ 15.	Groups of different types of employees who work in health care facilities.	b. Quality client care
_____ 16.	Continuing to learn new things throughout the career of a housekeeper.	c. Health care team
_____ 17.	Providing clients with the best care possible.	d. Policy and procedure manuals
_____ 18.	An employee learns skills to work in several departments in a health care facility.	e. Delegate
_____ 19.	Contains the rules of a facility and the steps to complete tasks.	f. Lifelong learning

Match the following abbreviations in Column B to the definition of the work done by these agencies or organizations in Column A.

	COLUMN A	COLUMN B
_____ 20.	Does research on diseases and makes recommendations for preventing the spread of them.	a. JCAHO
_____ 21.	Licenses long-term care facilities.	b. Division of Aging
_____ 22.	Surveys and accredits hospitals and long-term care facilities.	c. OSHA
_____ 23.	Sets regulations for the proper disposal of hazardous waste products.	d. CDC
_____ 24.	Sets health and safety standards to protect employees.	e. EPA

Mark each of the following descriptions with "a" if the behavior would be professional behavior or "b" if the behavior would be unprofessional behavior.

	COLUMN A	COLUMN B
_____ 25.	Clocks in to work on time every day.	a. Professional behavior
_____ 26.	Returns from break only five minutes late.	b. Unprofessional behavior
_____ 27.	Has only four days of unexcused work each month.	
_____ 28.	Performs assigned job thoroughly and efficiently.	
_____ 29.	Holds a door open for a visitor.	
_____ 30.	Wears a wrinkled uniform to work.	

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. When the housekeeper keeps client information private, the housekeeper is:

   a. Preventing false imprisonment.
   b. Maintaining confidentiality.
   c. Being negligent.
   d. Promoting wellness.

2. A patient tells you something you think is important to tell nursing staff. An appropriate way to tell the nurse is:

   a. By announcing it over the hospital's intercom.
   b. By speaking confidentially to the nurse in an area of the hospital reserved for employees.
   c. By writing it on a piece of paper and taping it to the client's door.
   d. By asking your co-worker to give the message to him or her.

3. Pulling the cubicle curtain around someone who is exposed is an example of helping maintain the patient's right to:

   a. Privacy.
   b. Confidentiality.
   c. Information about his or her medical condition.
   d. Make decisions for him or herself.

4. Select the best response to a client who asks you to help her back into her bed from the chair at the bedside.

   a. "It's not time to go back to bed; you'll have to wait."
   b. "I'll help you to your bed as soon as I finish cleaning your room."
   c. "Put your call light on. If the nurse doesn't come, I'll help you."
   d. "I'll tell your nurse you're ready to go to bed. I'm not allowed to help you."

5. Select the best response to a client who asks you to empty his urinal so he can use it again.

   a. Empty the urinal in the toilet and tell the nurse.
   b. "I can't empty your urinal; however, I will notify your nurse that you need the urinal emptied."
   c. "That's not my job. You'll just have to wait until the nurse comes in so you can ask him or her for help."
   d. Have the resident empty it for himself.

6. Select the best response to Mrs. Smith who has a picture of water at the bedside and states, "I'm so thirsty, but I can't reach the pitcher."

   a. Pour a glass of water and give it to her.
   b. Place the water pitcher closer so Mrs. Smith can pour herself water.
   c. Tell Mrs. Smith she can't have water until the nurse comes in.
   d. Suggest to Mrs. Smith that she put her call light on.

7. An example of an external customer is:

   a. A visitor who is visiting a client.
   b. A physical therapist exercising a client.
   c. A physician caring for a client.
   d. A nurse who asks you to clean up a spill.

8. An example of an internal customer is:

   a. A visitor eating in the dining room.
   b. A salesperson for cleaning products.
   c. The nursing staff.
   d. The client.

9. When communicating it is important that the verbal and nonverbal communication:

   a. Send the same message.
   b. Send opposite messages.
   c. Be sent at exactly the same time.
   d. Be positive when a negative message must be sent.

10. To encourage good oral communication the housekeeper should.

    a. Avoid eye contact so the client feels free to talk.
    b. Avoid using nonverbal communication so the housekeeper doesn't confuse the client.
    c. Talk very loud in case there is a hearing problem.
    d. Use active listening skills when communicating.

11. A way to achieve a pleasant tone of voice when talking on the telephone is to:

    a. Think about happy things while talking on the telephone.
    b. Smile as you speak on the telephone.
    c. Focus on a client in the waiting room who is pleasant.
    d. Continue with the work you were doing as you answer the telephone.

12. Which of the following should be reported to maintenance for repair?

    a. A floor tile that is cracked and loose.
    b. A wall that is painted pink when the client likes blue.
    c. A toilet that is flushing correctly.
    d. A light bulb that is 60 watts when the client wants 75 watts.

Place an "a" beside behaviors that will build positive customer relations and a "b" beside behaviors that would not build positive customer relations.

COLUMN A	COLUMN B
_____ 13. Give directions to a visitor to a client's room	a. Builds positive customer relations.
_____ 14. Avoid talking to clients so you don't risk breaking confidentiality.	b. Does not build positive customer relations.
_____ 15. Agree to clean up a spill and get to it an hour later.	
_____ 16. Smile and have a positive attitude when asked to do a task.	

Matching. Place an "a" next to items that are verbal communication and a "b" next to items that are nonverbal communication.

COLUMN A	COLUMN B
_____ 17. Wink	a. Verbal communication
_____ 18. Gruff tone of voice	b. Nonverbal communication
_____ 19. The words "thank-you"	
_____ 20. A letter	
_____ 21. Reaching out to shake hands	

Match the following communication tools in Column B with a description of the tool in Column A.

	COLUMN A	COLUMN B
_____ 22.	A written message through the computer.	a. Fax machine
_____ 23.	A spoken message broadcast throughout the health care facility with speakers.	b. Beeper/pager
_____ 24.	A small electronic tool that vibrates or makes a noise to alert the wearer of a message.	c. E-mail
_____ 25.	Used to send a written message from one department to another by transmission through the telephone wires.	d. Intercom

Mark the following situations with an "a" if it is an emergency situation or a "b" if it is a non-emergency situation.

	COLUMN A	COLUMN B
_____ 26.	A client requests a drink from the cafeteria.	a. Emergency
_____ 27.	A client exhibits cyanosis (bluish color around the lips).	b. Non-emergency
_____ 28.	A client gasps for breath.	
_____ 29.	A client complains of a lost book.	
_____ 30.	A client is laying on the floor.	

172

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. To avoid exposure to radiation, what should the housekeeper do when cleaning in a room where radiology is about to do a portable X-ray?

   a. Leave the room until the X-ray has been completed.
   b. Put on a disposable gown and a mask and continue working.
   c. Remain in the room since there is no chance of radiation exposure from a portable X-ray.
   d. Leave the room, close the door, and place a radiation caution sign on the door.

2. To properly unplug an electrical cord the housekeeper should:

   a. Grasp the cord three feet from the electrical outlet and pull gently.
   b. Unplug it in any way possible but never by the cord.
   c. Grasp the plug end and pull it from the socket.
   d. Move the equipment away from the outlet until the cord comes unplugged.

3. What should the housekeeper do to plug in a ground plug (one that has three prongs) into an outlet with only two spaces?

   a. Use an extension cord with three prongs to plug into the equipment and two prongs to plug into the outlet.
   b. Use an adapter to convert the plug from three prongs to two prongs.
   c. Tell your supervisor you can not do the job.
   d. Find an outlet with three prongs.

4. Which best describes the role of OSHA in the housekeeper's work environment?

   a. To employ staff on site who monitor workers for safe work habits.
   b. To study infections and issue recommendations to prevent them.
   c. To prevent injuries and protect the health of America's workers.
   d. To terminate managers of sites that do not meet the minimum safety requirements.

5. Which symbol indicates a biohazard?

   a.

   b.

   c.

   d.

6. Which symbol indicates a radiation warning?

a.

b.

c.

d.

7. A material safety data sheet can be used by a worker to learn how to:

   a. Inspect a piece of equipment for damage.
   b. Handle a hazardous chemical.
   c. Clean up a blood spill.
   d. Safely lift an object.

8. Which of the following describes safe habits for using a ladder?

   a. Reach as far out as possible on each side when cleaning.
   b. Stand on the top steps of the ladder as long as there is a place to balance yourself.
   c. Place the front legs of the ladder on one step and the back legs on the next step.
   d. Place the ladder on a firm level surface close to the object you are trying to reach.

9. An important principle to remember about working with cleaning chemicals is:

   a. That additional concentrated cleaner can be used for very dirty surfaces.
   b. That chemicals can be mixed in the secondary container even when there is cleaner left.
   c. That most chemicals can be used on any surface.
   d. That label directions must be followed exactly as written.

10. If a label said to mix one ounce of concentrated cleaner with one gallon of water, what would the housekeeper do?

   a. Place one gallon of water in a clean container and add one ounce of cleaner to the water.
   b. Put one ounce of cleaner in a clean container and pour one gallon of water into the cleaner.
   c. Select the cleaner and add as many gallons of water as the number of ounces in the concentrate.
   d. Find a bottle with this type of cleaner in it and add one ounce of the concentrated cleaner, followed by one gallon of water.

11. Select the appropriate personal protective equipment for mixing a concentrated cleaner.

    a. No personal protective equipment necessary
    b. Disposable, non-sterile exam gloves
    c. Utility gloves, goggles, and a mask
    d. Goggles and a mask

12. Cleaning chemicals should be stored:

    a. In the same area as office supplies.
    b. In a locked cabinet or room when not being used.
    c. In any area since cleaning chemicals are not hazardous.
    d. In the same area as medications so clients cannot get to them.

13. After diluting a concentrated cleaner into a secondary container, what must be done?

    a. A label including the name of the chemical, directions for use, cautions, and the hazard rating must be attached.
    b. A label with the name of the cleaner and location of MSDS must be attached.
    c. The name of the cleaner must be written on the bottle using a permanent marker.
    d. The leftover concentrated cleaner in the primary bottle must be discarded.

14. What is the difference between the old system of category specific isolation and the current system of standard precautions?

    a. Standard precautions requires use of personal protective equipment for all patients and all body fluids; whereas category specific requires a diagnosis first.
    b. Standard precautions requires use of gloves, gown, and mask for all residents; whereas category specific uses gloves, gown, and mask after the diagnosis.
    c. Category specific was used only for diseases transmitted by the airborne route and standard precautions is used for direct contact.
    d. Category specific precautions required gloves for all patients and gown and mask or eye shield for splashes; whereas standard precautions only uses personal protective equipment after a diagnosis of an infectious disease.

15. According to standard precautions the housekeeper should put gloves on:

    a. Before entering any client's room.
    b. After cleaning a room for a client with an infectious disease.
    c. Before entering the room of a client with an infectious disease.
    d. Any time the housekeeper will come in contact with blood or other body fluid.

16. Which of the following lists include all possible personal protective equipment under standard precautions?

    a. Gloves and a mask
    b. Face shield and gloves
    c. Gloves, gown, mask, and protective eyewear
    d. Gloves, rubber gown, mask, goggles, shoe covers, and surgical cap

17. What three additional precautions are included in transmission based precautions for clients diagnosed with an infectious disease?

    a. Tuberculosis precautions, chicken pox precautions, and AIDS precautions
    b. Airborne precautions, droplet precautions, and contact precautions
    c. Cough precautions, sneeze precautions, and spit precautions
    d. Blood precautions, urine precautions, and diarrhea precautions

18. The number one way to prevent the spread of infections is to:

    a. Cover your mouth when you cough.
    b. Use a tissue when you sneeze.
    c. Wash your hands.
    d. Wear gloves when you work.

19. What personal protective equipment would the housekeeper use to clean a small blood spill on the floor?

    a. Gloves and a mask
    b. Gloves, gown, mask and goggles
    c. Nonsterile disposable gloves
    d. No personal protective equipment required

20. What must be done to transport infectious hazardous wastes from the unit for disposal?

    a. No special precautions are needed.
    b. Place waste in a trash bag and send it to be burned.
    c. Treat waste with a disinfectant chemical and dispose of it with regular trash.
    d. Place waste in a bag or box with the biohazard label and leave no contamination on the outside.

21. Place the steps for responding to a fire in the correct order.

    a. Alarm, confine, reduce, and extinguish
    b. Extinguish, confine, alarm, and rescue
    c. Rescue, alarm, confine, and extinguish
    d. Alarm, confine, extinguish, and rescue

22. The responsibilities of the housekeeper in emergencies such as fire, tornado, bomb threat, or other disasters will vary from facility to facility. How will the housekeeper know what to do?

    a. Follow the procedure as outlined in the facility's policies.
    b. Call the housekeeping supervisor on call.
    c. Contact the hospital administrator.
    d. Memorize the text from this lesson.

23. Wearing a proper name badge is required in most health care facilities because it:

    a. Allows people to be more comfortable because they can call staff by first name.
    b. Tells staff, visitors, and patients that the person wearing the badge is an employee.
    c. Makes the housekeeper look more professional.
    d. Makes the housekeeper feel important.

Matching: Mark each of the items in Column A with an "a" if it is a safe work habit or a "b" if it is an unsafe work habit.

COLUMN A		COLUMN B
_____ 24.	Keeping legs close together and bending over at the waist to pick up a box	a. Safe work habit
_____ 25.	Keeping a heavy object close to the body to carry it to a new location	b. Unsafe work habit
_____ 26.	Carefully plugging in an extension cord with a frayed end	
_____ 27.	Never using an open flame such as a match or lighter near someone who is using oxygen	
_____ 28.	Placing "wet floor" signs before beginning to mop a hallway or spill	

Matching: Match the following cleaners in Column B with their descriptions in Column A.

	COLUMN A	COLUMN B
_____ 29.	A cleaner used by housekeepers that may not kill microorganisms.	a. Window cleaner
_____ 30.	A chemical that kills most microorganisms and is used on many surfaces.	b. Toilet bowl cleaner c. Disinfectant
_____ 31.	An ammonia-based liquid that cleans glass.	d. All purpose cleaner
_____ 32.	A formula that traps dust and shines wood surfaces.	e. Furniture polish
_____ 33.	A mild acid that housekeepers must avoid splashing because it can destroy surrounding surfaces.	

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. It is important to keep equipment clean and in good working order because:

   a. It is the policy of the health care facility.
   b. It makes the equipment last longer and work properly.
   c. It prevents the housekeeper from getting and spreading microorganisms.
   d. It makes the equipment last five years past the original warranty.

2. How often should the housekeeper's cart be cleaned and restocked?

   a. Daily at the end of the shift
   b. Each Saturday at the beginning of the shift
   c. Monthly on the day designated by facility policy
   d. Twice weekly on the days designated by facility policy

3. When should the vacuum cleaner bags be changed?

   a. Daily
   b. Weekly
   c. When full
   d. When half full

4. It is very important to not use a wet-dry vacuum with a frayed electrical cord because:

   a. Water is a good conductor of electricity.
   b. Electricity will not pass through a frayed cord.
   c. The plug might come off when unplugged.
   d. The frayed cord will prevent the ground plug from working.

5. The housekeeper should never use his or hands to push items in the trash bags down. Why?

   a. Sharp items might accidentally have been placed in the bag.
   b. The bag might split open and the trash will fall out.
   c. His or her gloves might have a hole allowing contamination of hands with microorganisms.
   d. He or she might forget to wash his or her hands afterwards.

6. Dusting is done in health care using a damp cloth because it:

   a. Protects the surface of wood furniture.
   b. Prevents spots from being left on the furniture.
   c. Kills microorganisms on the furniture.
   d. Prevents the microorganisms in the dust from getting into the air.

7. When cleaning toilets, a mask and face shield may be worn because they:

   a. Lessen the odor which may be too strong for the housekeeper.
   b. Allow the housekeeper to get closer to see the soiling.
   c. Limit the danger of splashing chemicals onto the face while cleaning the toilet.
   d. Prevent the housekeeper from breathing into clients' faces.

8. The dust mop head must be changed:

   a. Once a week on the first day of the work week.
   b. Any time it is soiled - usually several times a day.
   c. Each day at the end of the shift.
   d. Every other day if it is dirty.

9. "Wet floor" signs should be placed:

   a. Before beginning to mop an area.
   b. As soon as the entire area has been mopped.
   c. At one end of the area the housekeeper is mopping.
   d. Next to the mop bucket and moved down the hallway as the housekeeper progresses.

10. When mopping a hallway only one side of the hallway is mopped at a time. This is done to:

    a. Save time when mopping because the mop will reach only halfway across most halls.
    b. Allow a dry side of the hallway for people to walk on.
    c. Prevent back injury by reaching too far.
    d. Clean one side as quickly as possible.

11. To effectively clean a spot from a carpeted floor surface, it is best to:

    a. Rub hand soap into the area and then scrub with a cleaning cloth.
    b. Wait until the spot has completely dried and then vacuum the carpet.
    c. Apply spot cleaner and soak up the stain with a cleaning cloth.
    d. Shampoo the entire carpet immediately.

Matching: Match the following pieces of equipment with its picture.

_____ 12. Housekeeper's cart

_____ 13. Vacuum cleaner

_____ 14. Dust mop

_____ 15. Wet mop

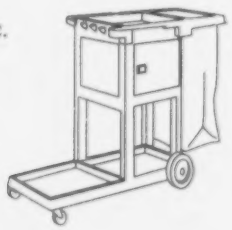
_____ 16. Mop bucket

_____ 17. Wet-dry vacuum

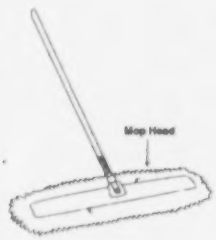
_____ 18. Standard floor machine

a.

c.



e.



g.

b.

d.

f.

Matching: Match each description of a floor surface in Column A with its name in Column B.

COLUMN A	COLUMN B
_____ 19. Hard floor surface usually in squares set together with grout	a. Carpet
_____ 20. Loops of yarn secured in a backing	b. Tile
_____ 21. Hard floor surface usually laid in a continuous sheet	c. Linoleum

Lesson 2: Routine Cleaning Tasks

Skill Sheet

EMPTY TRASH

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Trash can liners

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Bring the housekeeper's cart near the door of the room in which you will be working.		
2. Select the appropriate size trash can liner for the trash container being emptied in the room.		
3. Put on nonsterile gloves.		
4. Remove the old trash can liner from the trash can.		
5. Tie the bag.		
6. Place a clean trash can liner in the trash can. (Some facilities may leave 2 or 3 extra liners in the bottom of the trash can in case the container gets full before the next scheduled pickup time.)		
7. Place the trash into the large trash bag on the housekeeper's cart.		

The student has satisfactorily completed the procedure "EMPTY TRASH" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

DAMP DUST SURFACES

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. All-purpose cleaner or disinfectant
3. Dusting cloth
4. Bucket

CHECK IF THE STUDENT DID THE FOLLOWING		
1. Select the spray bottle with all-purpose cleaner or disinfectant or prepare a bucket with the proper cleaning solution. (The cleaner used will depend on the surfaces to be cleaned and policy of the facility.)		
2. Select a clean dusting cloth.		
3. Put on nonsterile gloves.		
4. Fold the cloth into a series of squares.		
5. Dampen the cloth in water or germicidal solution, depending on the requirement of the area. Squeeze out all excess solution to avoid drips.		
6. Mist the area to be dusted lightly if using the spray bottle.		
7. Begin dusting at the entrance door and work around the room.		
8. Wipe the surface with a clean, dry cloth to prevent streaking and water spots immediately after damp dusting each item in the room.		
9. Place dirty cloths in a linen bag to be sent to the laundry for cleaning at the end of the shift.		
10. Remove gloves.		
11. Wash hands.		
12. Return equipment to the housekeeper's cart.		

The student has satisfactorily completed the procedure "DAMP DUST SURFACES" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN GLASS SURFACES AND MIRRORS

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Clean, dry buffing cloths
3. Window glass cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select clean dry buffing cloths.		
2. Select window glass cleaner.		
3. Apply window cleaner to the mirror or window glass.		
4. Buff the surface dry using a clean, dry buffing cloth.		
5. Make sure all streaks and spots are cleaned from the mirror or window.		

The student has satisfactorily completed the procedure "CLEAN GLASS SURFACES AND MIRRORS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN SINK

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Germicidal solution
3. Powdered cleanser
4. Cleaning cloths

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Apply germicidal solution to the sink or moisten all areas of the sink and apply powdered cleanser.		
4. Clean all interior and exterior surfaces of the sink with a clean cloth, dampened with germicidal solution (or water if using a powdered cleanser).		
5. To remove stains, use a lotion-type (mildly abrasive) cleanser with a brush or use a sponge with an abrasive pad to scour the stain.		
6. Thoroughly rinse and dry all areas of the sink, including the metal fixtures.		
7. Wipe the plumbing underneath the fixture or dust the plumbing underneath depending on facility policy.		
8. Place soiled cleaning cloths into a bag to be sent to the laundry.		
9. Remove nonsterile gloves.		
10. Wash hands.		
11. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN SINK" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN TOILET

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Disinfectant
3. Toilet bowl cleaner
4. Cleaning cloths
5. Toilet bowl mop

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Mix disinfectant/detergent with water in a gallon bucket if necessary.		
4. Flush the toilet.		
5. Apply toilet bowl cleaner to the interior surfaces of the toilet.		
6. Clean the inside of the toilet bowl completely. Clean the underside of the rim of the toilet.		
7. Apply disinfectant to the toilet seat and all other outside surfaces including the pipes and toilet base.		
8. Clean toilet seat and other outside surfaces with a clean cloth.		
9. Buff dry.		
10. Place soiled cleaning cloths into a bag to be sent to the laundry.		
11. Remove nonsterile gloves.		
12. Wash hands.		
13. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN TOILET" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) **Date**

Lesson 2: Routine Cleaning Tasks

Skill Sheet

COMPLETE DETAILED WALL CLEANING

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Disinfectant cleaner
3. Cleaning cloths

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Spray a section of the wall with disinfectant cleaner.		
4. Scrub the wall with a clean cloth dampened with disinfectant.		
5. Continue with sections of the wall until the entire wall surface has been cleaned.		
6. Place soiled cleaning cloths into a bag to be sent to the laundry.		
7. Remove nonsterile gloves.		
8. Wash hands.		
9. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "COMPLETE DETAILED WALL CLEANING" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN CEILINGS, OVERHEAD LIGHTS, AND VENTS

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Ladder
3. Vacuum and brush accessories
4. Disinfectant cleaner
5. Two buckets

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Move the furniture in the room to provide adequate work space under the ceiling. Furnishings which cannot be removed from the area should be covered with a drop cloth.		
4. Set up the ladder under the area to be cleaned. Remember to use a ladder only on a flat level surface and do not stand on the top step of the ladder.		
5. Vacuum the entire ceiling using brush accessories to remove loose surface dust. Vents should be vacuumed.		
6. Fill one bucket with water. Fill the second bucket with the correct mixture of water and disinfectant cleaner.		
7. Place the bucket of water with disinfectant on the ladder shelf.		
8. Wash the entire ceiling area with a clean damp cloth. Do not try to reach too far; move the ladder to maintain safety.		
9. Place the bucket of water on the ladder shelf.		
10. Rinse the ceiling with a clean cloth dampened in the clear water.		
11. Remove overhead light globes.		
12. Wash in a clean disinfectant solution.		
13. Rinse in clear water.		

14. Dry thoroughly with a clean cloth.		
15. Replace overhead light globes.		
16. Place soiled cleaning cloths into a bag to be sent to the laundry.		
17. Remove nonsterile gloves.		
18. Wash hands.		
19. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN CEILINGS, OVERHEAD LIGHTS, AND VENTS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN SHOWER

Student Name _____ Date _____

EQUIPMENT:

1. Germiside solution or powder cleanser
2. Cleaning cloths
3. Nonterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. If using a powder cleanser, dampen the entire shower surface.		
4. If using a germicide solution, apply solution to the interior surfaces including the shower curtain or door tracks, doors, walls, soap dish, faucets, and shower head.		
5. Use dampened cleaning cloths if using powder cleanser, or clean cloths dampened in germicidal solution, to wipe all surfaces of the shower.		
6. Use a brush, if necessary, to remove soap scum from the wall or floor of the shower.		
7. Rinse all surfaces thoroughly.		
8. Dry all surfaces carefully to prevent slips and falls.		
9. Damp wipe all chrome handles and fittings.		
10. Dry chrome handles and fittings with a dry cloth to prevent spotting.		
11. Inspect the shower curtain for visible soil. If soiled, replace it with a clean one. Bag the soiled curtain for laundering or dry cleaning.		
12. Place soiled cleaning cloths into a bag to be sent to the laundry.		
13. Remove nonsterile gloves.		
14. Wash hands.		
15. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN SHOWER" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN BATHTUB

Student Name _____ Date _____

EQUIPMENT:

1. Germicide solution or powder cleanser
2. Cleaning cloths
3. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. If using a powder cleanser, dampen the entire tub surface.		
4. If using a germicide solution, apply solution to the interior surfaces including the soap dish and faucets.		
5. Use dampened cleaning cloths if using powder cleanser, or clean cloths dampened in germicidal solution to wipe all surfaces of the tub.		
6. Use a brush, if necessary, to remove soap scum from the surface of the tub.		
7. Rinse all surfaces thoroughly.		
8. Dry all surfaces carefully to prevent slips and falls.		
9. Damp wipe all chrome handles and fittings.		
10. Dry chrome handles and fittings with a dry cloth to prevent spotting.		
11. Place soiled cleaning cloths into a bag to be sent to the laundry.		
12. Remove nonsterile gloves.		
13. Wash hands.		
14. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN BATHTUB" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

196

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN CLIENT BED

Student Name _____ Date _____

EQUIPMENT:

1. Germicide solution
2. Bucket
3. Cleaning cloths
4. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Mix disinfectant/detergent and water in bucket.		
4. Clean the top of the overbed table with cleaning cloth soaked in disinfectant solution.		
5. Clean one side of the pillow while the pillow is laying on the bed.		
6. Place the clean side of the pillow onto the clean overbed table.		
7. Clean the dirty side of the pillow. (Observe the pillow for any tears or cracks - replace if necessary).		
8. Begin cleaning the bed at the headboard.		
9. Wipe the top of the mattress using a cloth and disinfectant solution. (Check for cracks and tears and report if any are found.)		
10. Turn the mattress sideways to one end of the bed.		
11. Clean the frame of the bed, including the springs and legs.		
12. Turn the mattress over onto the cleaned portion of the frame. Clean the top side of the mattress and wipe with disinfectant. Clean the other half of the frame. (Check the mattress for cracks and tears. Report if any are found.)		
13. Clean the side rails and the bed control panel. Work toward the foot of the bed until all surfaces have been cleaned. Complete the cleaning by wiping the wheels.		

14. Inspect the bed while cleaning. Report any damage or needed repairs to the supervisor.		
15. Empty the dirty water from the bucket and rinse the bucket.		
16. Place soiled cleaning cloths into a bag to be sent to the laundry.		
17. Remove nonsterile gloves.		
18. Wash hands.		
19. Return all chemicals and equipment to the proper storage location.		
20. Make the bed. (Steps of procedure for making a client bed is discussed in Unit IV, Lesson 1.)		
21. Use facility policy to notify nursing staff that the bed is clean.		

The student has satisfactorily completed the procedure "CLEAN CLIENT BED" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) _____ Date _____

Lesson 2: Routine Cleaning Tasks

Skill Sheet

DUST MOP FLOOR

Student Name _____ Date _____

EQUIPMENT:

1. Treated dust mop head
2. Correct size dust mop frame and handle
3. Dust pan
4. Small brush
5. Putty knife

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Attach the dust mop head to the dust mop frame.		
3. Starting at one end of the corridor, walk behind the mop pushing it in front of you. Do not lift the mop off the floor once you have started. Use a swivel motion of the frame and wrist action to change direction.		
4. Move all carts and equipment, dust carefully underneath them, and replace them after passing.		
5. Remove any gum or other sticky residue from the floor by gently prying it loose with the putty knife. Be careful not to scratch the floor finish.		
6. Pivot the mop at the end of the area and return.		
7. After mopping an entire area, gently sweep the pile of litter and dirt into the dustpan using the small broom. Be careful not to stir up the dust.		
8. Dispose of the dirt and litter in an appropriate trash container.		
9. Change the dust mop head when necessary.		
10. Remove the dust mop head and place it in a bag for laundering and retreatment at the end of the shift.		
11. Return the dust mop equipment to the proper storage area. Do not store the mop with the mop head attached to the mop frame.		

The student has satisfactorily completed the procedure "DUST MOP FLOOR" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

200

Lesson 2: Routine Cleaning Tasks

Skill Sheet

DAMP MOP FLOOR

Student Name _____ Date _____

EQUIPMENT:

1. Mop cart with mop bucket and wringer
2. Wet mop head and handle
3. Germicide/disinfectant
4. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Fill bucket with water.		
4. Add germicide/disinfectant solution according to facility policy.		
5. Dust mop the area to be wet mopped.		
6. Place wet-floor signs at each end of the work area.		
7. Wet the mop in the germicide/disinfectant solution.		
8. Wring mop head enough to prevent dripping and pooling of the solution on the floor.		
9. Mop the floor. Turn the mop over when one side becomes dirty.		
10. Rinse the mop when both sides of the mop have become dirty. Rinsing is usually required every eight to ten feet.		
11. Change the mop head when it becomes dirty.		
12. Change the germicide/disinfectant solution when it becomes dirty, when you change work areas, or as directed by the facility procedure manual.		
13. Empty the dirty water when all areas have been completed.		
14. Clean the bucket, wringer, and mop cart.		
15. Place dirty mop heads in a bag and send to laundry.		
16. Remove nonsterile gloves.		

201

17. Wash hands.		
18. Return all chemicals and equipment to the proper storage location.		
19. Pick up wet floor signs when the area has dried.		

The student has satisfactorily completed the procedure "DAMP MOP FLOOR" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN BLINDS

Student Name _____ Date _____

EQUIPMENT:

1. Cleaning bucket
2. Disinfectant
3. Cleaning cloths
4. Ladder
5. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Fill bucket with water.		
4. Add germicide/disinfectant solution according to facility policy.		
5. Position ladder near the blinds to be cleaned.		
6. Clean each leaf of the blinds, starting at the top and working down. Cover the top and bottom at the same time, washing from one end to the other.		
7. Empty the dirty water from the bucket and rinse the bucket.		
8. Place soiled cleaning cloths into a bag to be sent to the laundry.		
9. Remove nonsterile gloves.		
10. Wash hands.		
11. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN BLINDS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

VACUUM CARPETED FLOORS

Student Name _____ Date _____

EQUIPMENT:

1. Vacuum
2. Edging tool
3. Replacement filter bags

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Check the bag to be sure it is not too full.		
3. Pick up large pieces of paper and other debris by hand and place in trash can.		
4. Begin to vacuum in the farthest corner and work toward the door. Vacuum the entire area, moving all furniture as you go and return it to the original location. Be sure that cords are kept out of the walkway.		
5. Use the edging tool to clean along the baseboard and other areas the vacuum cannot reach.		
6. Return the vacuum to its storage area.		

The student has satisfactorily completed the procedure "VACUUM CARPETED FLOORS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN OVERBED TABLE AND BEDSIDE TABLE

Student Name _____ Date _____

EQUIPMENT:

1. Cleaning bucket
2. Disinfectant
3. Cleaning cloths
4. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Fill bucket with water.		
4. Add germicide/disinfectant solution according to facility policy.		
5. Disinfect the top of the bedside table and all four sides including the legs.		
6. Disinfect inside and outside of the drawers.		
7. Raise the overbed table to full height.		
8. Disinfect the top of the overbed table, inside and outside of the drawer, the pedestal, base, and wheels.		
9. Empty the dirty water from the bucket and rinse the bucket.		
10. Place soiled cleaning cloths into a bag to be sent to the laundry.		
11. Remove nonsterile gloves.		
12. Wash hands.		
13. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN OVERBED TABLE AND BEDSIDE TABLE" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 2: Routine Cleaning Tasks

Skill Sheet

CLEAN FURNITURE

Student Name _____ Date _____

EQUIPMENT:

1. Cleaning bucket
2. Disinfectant
3. Cleaning cloths
4. Nonsterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves.		
3. Fill bucket with water.		
4. Add germicide/disinfectant solution according to facility policy.		
5. Use a cleaning cloth dampened with germicide/disinfectant solution to wash the surfaces of all non-wooden furniture that has a washable surface.		
6. Wash all surfaces of the furniture including the legs.		
7. Dry all furnishings so there will be no water spots.		
8. Empty the dirty water from the bucket and rinse the bucket.		
9. Place soiled cleaning cloths into a bag to be sent to the laundry.		
10. Remove nonsterile gloves.		
11. Wash hands.		
12. Return all chemicals and equipment to the proper storage location.		

The student has satisfactorily completed the procedure "CLEAN FURNITURE" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 3: Floor Cleaning

Skill Sheet

TOP SCRUB AND RECOAT FLOOR

Student Name _____ Date _____

EQUIPMENT:

1. Wet floor signs
2. Rotary floor machine with appropriate pad
3. Dust mop
4. Three mop buckets with two wringers
5. Wet mop and three wet mop heads
6. Scrub solution
7. Floor finish
8. Wet/dry vacuum
9. Cleaning cloths
10. Putty knife
11. Hand strip pads
12. Drop cloths

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Prepare scrub solution in mop bucket according to facility policy.		
3. Place clear rinse water in a second mop bucket.		
4. Move furniture and equipment out of the way if necessary. Do not block passageways, doorways, or fire exits.		
5. Place wet floor signs and mark off the area to be scrubbed.		
6. Dust mop the area to be scrubbed.		
7. Use wet mop to apply scrub solution from the mop bucket. DO NOT WRING OUT MOP. Place saturated mop directly on the floor and spread solution. DO NOT SPLASH.		
8. Scrub the baseboard, corners, and edges using the hand pad and putty knife as needed.		
9. Scrub floor using the rotary floor machine. Start the machine in the center of the wet area and guide the machine from side to side to cover the entire area. Do not splash scrub solution against the wall.		
10. Reapply scrub solution as needed.		
11. Use the wet/dry vacuum to pick up the dirty scrub solution from the floor.		
12. Thoroughly rinse the area with clear water.		

13. Repeat steps 10-12 until the entire area is scrubbed, vacuumed, and rinsed.		
14. Allow the area to dry thoroughly.		
15. Line mop bucket with a plastic trash can liner.		
16. Pour floor finish into the lined mop bucket.		
17. Use a clean wet mop head and apply the first coat of floor finish. Outline the area up to approximately two (2) inches from the baseboard. DO NOT APPLY FLOOR FINISH ON THE BASEBOARDS.		
18. Allow to dry.		
19. Apply a second coat of floor finish.		
20. Allow to dry thoroughly.		
21. Return equipment to storage.		
22. Rinse mop buckets and allow to dry.		
23. Discard the trash can liner used in the finish bucket.		
24. Place soiled mop heads in a bag and send to the laundry.		
25. Remove the pad from the rotary floor machine. Wash, rinse, and dry it thoroughly before storing. Wipe the machine clean.		
26. Remove wet floor signs when the area is completely dry.		
27. Do not buff the floor for 24-48 hours after finishing.		

The student has satisfactorily completed the procedure "TOP SCRUB AND RECOAT FLOOR" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) _____ Date _____

Lesson 3: Floor Cleaning

Skill Sheet

STRIP AND RECOAT FLOOR

Student Name _____ Date _____

EQUIPMENT:

1. Wet floor signs
2. Rotary floor machine with appropriate pad
3. Dust mop
4. Four mop buckets with two wringers
5. Wet mop and four wet mop heads
6. Strip solution
7. Neutral rinse
8. Floor finish
9. Wet/dry vacuum
10. Cleaning cloths
11. Putty knife
12. Hand strip pads
13. Drop cloths
14. Duct tape

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Prepare stripper solution in mop bucket at the proper dilution (according to facility policy).		
3. Prepare neutral rinse in mop bucket with the proper dilution (according to facility policy).		
4. Prepare one mop bucket with wringer with clear rinse water.		
5. Move furniture and equipment out of the way if necessary. Do not block passageways, doorways, or fire exits.		
6. Place wet floor signs and mark off the area to be scrubbed. Place duct tape at doorways to establish a clean edge.		
7. Dust mop the area to be scrubbed.		
8. Apply stripper solution to the floor surface using a wet mop. DO NOT WRING OUT THE MOP. Place saturated mop directly on the floor and spread the solution.		
9. Apply stripper solution to baseboards or spray on baseboard stripper.		
10. Allow stripper solution to remain on the floor the amount of time recommended by the manufacturer. Do not allow the stripper solution to dry on the floor. Apply additional stripper if necessary.		

11. Use the rotary scrub machine to scrub the area where the stripper has been applied. Overlap each scrub path.		
12. Scrub the baseboard, corners, and edges with a hand pad or putty knife as needed.		
13. Vacuum the stripper solution with a wet/dry vacuum.		
14. Repeat steps 8-11 on areas where any floor finish remains.		
15. Apply neutral rinse solution using a clean wet mop. DO NOT WRING OUT THE MOP. Place saturated mop directly on the floor and spread the solution. Apply solution to the baseboards also.		
16. Vacuum the neutral rinse solution with a wet/dry vacuum.		
17. Rinse the floor and baseboards using the clear rinse water from the bucket with the wringer and a clean mop head.		
18. Allow the floor to dry thoroughly.		
19. Line mop bucket with a plastic trash can liner.		
20. Pour floor finish into the lined mop bucket.		
21. Using a clean wet mop head, apply the first coat of floor finish. Outline the area up to approximately two (2) inches from the baseboard. DO NOT APPLY FLOOR FINISH ON BASEBOARDS.		
22. Allow to dry.		
23. Apply three to four coats of floor finish, allowing each coat to dry thoroughly before applying the next coat.		
24. Return equipment to storage.		
25. Rinse mop buckets and allow to dry.		
26. Discard the trash can liner used in the finish bucket.		
27. Place soiled mop heads in bag and send to laundry.		
28. Remove the pad from the rotary floor machine. Wash, rinse, and dry it thoroughly before storing. Wipe the machine clean.		
29. Remove wet floor signs when the area is completely dry.		

The student has satisfactorily completed the procedure "STRIP AND RECOAT FLOOR" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) 21.

Date

Lesson 3: Floor Cleaning

Skill Sheet

SPRAY BUFF FLOOR

Student Name _____ Date _____

EQUIPMENT:

1. 1400-1500 RPM high speed floor machine
2. Buffing pads
3. Spray buff solution
4. Putty knife
5. Dust mop and handle
6. Counter brush and dust pan
7. Wet mop
8. Mop bucket and wringer
9. Netural cleaner solution
10. Wet floor signs

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Dust mop the area to be spray buffed.		
3. Mark off the area to be damp mopped with wet floor signs.		
4. Damp mop the area to be spray buffed.		
5. Observe the floor surface and rid area of gum, tape, black marks, or other debris.		
6. Allow the floor to dry.		
7. Place buffing pad on the high speed floor machine.		
8. Spray a light mist of spray buff solution over a 10 square foot area. Do not apply it too heavy because the pad will become saturated too quickly.		
9. Buff the area with the high speed floor machine until the floor surface is dry. Work in a side to side movement covering the area sprayed with the buffing solution. It may appear dull at first, but it will become shiny the more it is buffed. DO NOT allow the pad to touch or mark up the baseboard surface.		
10. Replace the buffing pads as they become soiled or full of buffing solution. Be sure to use both sides of the pad.		
11. Dust mop the floor after the entire floor area has been spray buffed.		
12. Clean all equipment and return it to its proper storage location.		

The student has satisfactorily completed the procedure "SPRAY BUFF FLOOR" according to the steps outlined.

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Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

214

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN CARPET BY USING WET EXTRACTION

Student Name _____ Date _____

EQUIPMENT:

1. Wet floor signs
2. Extraction cleaner
3. Spot cleaner
4. Portable extractor
5. Vacuum cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Fill the machine's solution tank with the extraction cleaner in the correct dilution.		
3. Vacuum the carpet in the area to be shampooed.		
4. Pre-spray spots or stains with spotting solution.		
5. Place the wet floor signs in the area to be cleaned.		
6. Inject cleaning solution into the carpet using the wand/head on the portable extractor. Move the head back and forth, evenly wetting the carpet to be cleaned. The vacuum on the extractor will draw the cleaning solution from the carpet as you pass over the carpet.		
7. Check the solution in the tank frequently and refill as necessary.		
8. Check the water in the recovery/waste tank frequently and empty as necessary.		
9. Allow the carpet to dry completely before allowing people to walk on the carpet again. To speed the drying time, a floor drying fan may be used.		
10. Disassemble the equipment and return it to the storage area. Empty the solution from the recovery tank and rinse the tank. Clean the hose, wand/head, and extraction unit.		

The student has satisfactorily completed the procedure "CLEAN CARPET BY USING WET EXTRACTION" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN CARPET BY USING BONNET CLEANING METHOD

Student Name _____ Date _____

EQUIPMENT:

1. Wet floor signs
2. Bonnet cleaner
3. Bonnet pads
4. Spot cleaner
5. Conventional low-speed floor machine with shampoo tank and shower-feed brush
6. Vacuum cleaner
7. Scrub brush
8. Cleaning cloths

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Fill the machine's solution tank or pump-up sprayer with properly diluted cleaning chemical.		
3. Vacuum the carpet in the area to be shampooed.		
4. Pre-spray spots or traffic lanes as necessary.		
5. Place a clean bonnet under the floor machine brush.		
6. Spray the cleaning solution on the carpet with the pump-up sprayer or begin dispensing a small amount of solution from the tank. DO NOT overwet. Do one section of carpet at a time.		
7. Work the area with the machine. Go over the spotted or heavy traffic areas more than once.		
8. Once the area has been agitated thoroughly, flip the bonnet pad, and pass over the area again to remove any additional moisture or soil. Change the bonnet pad as it becomes soiled.		
9. Repeat steps 6-8 until the entire carpet has been cleaned.		
10. Place soiled bonnet pads in plastic bags and send to laundry.		
11. Return equipment to storage area. Clean all equipment, and empty solution tank or pump sprayer.		

The student has satisfactorily completed the procedure "CLEAN CARPET BY USING BONNET CLEANING METHOD" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN CARPET BY USING THE DRY EXTRACTION METHOD

Student Name _____ Date _____

EQUIPMENT:

1. Dry extraction cleaner
2. Spreader
3. Hand sifter
4. Twin brush scrubber
5. Brush
6. Vacuum cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Vacuum the carpeted area to be cleaned.		
3. Apply dry extraction cleaner with spreader or hand sift as necessary.		
4. Agitate into the carpet with twin brush scrubber or hand brush.		
5. Allow cleaner to remain on the carpet for a minimum of 30 minutes.		
6. Vacuum the carpet thoroughly to remove the cleaner.		
7. Return all equipment and supplies to the storage area.		
8. Clean and store the equipment.		

The student has satisfactorily completed the procedure "CLEAN CARPET BY USING THE DRY EXTRACTION METHOD" according to the steps outlined.

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Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN SPOT FROM CARPET

Student Name _____ Date _____

EQUIPMENT:

1. Cleaning cloths
2. Putty knife
3. Scrub brush
4. Spotting cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Soak up excess liquid with a towel or a rag.		
3. Apply spot cleaner to the stain. Allow the cleaner to soak into the stain.		
4. Use a cleaning cloth to blot up the cleaner and the stain.		
5. Use the putty knife to work the cleaner into the stain if necessary. Start at the edge of the spot and work inward. Do not spread the spot. Blot with a cleaning cloth to absorb the cleaner and stain.		
6. Return the spot cleaner and equipment to storage.		
7. Place cleaning cloths in a bag and send to laundry.		

The student has satisfactorily completed the procedure "CLEAN SPOT FROM CARPET" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN BLOOD/BODY SUBSTANCES FROM A CARPETED SURFACE

Student Name _____ Date _____

EQUIPMENT:

1. Wet floor sign
2. Cleaning cloths
3. Nonsterile gloves
4. Rubber utility gloves
5. Disinfectant solution
6. Portable extractor
7. Vacuum and solution hose
8. Wand/head
9. Extraction cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Put on nonsterile gloves. Put on a mask, eye protection, and gown if there is a risk of splashing.		
3. Place the wet floor signs around the area.		
4. Soak up the blood or body fluid using cleaning cloths or paper towels.		
5. Discard the soiled cleaning cloths or paper towels into a trash bag labeled with a biohazard tag.		
6. Saturate the soiled carpet surface with disinfectant solution.		
7. Allow the disinfectant solution to remain on the carpet for five (5) minutes.		
8. If the spill is small, blot up the stain and disinfectant using cleaning rags. Re-clean the spot using spot removal cleaning procedures. Place all soiled cleaning cloths into the trash bag.		
9. If the spill is large, use the cleaning procedure for wet extraction.		
10. Return the equipment and supplies to the storage area.		
11. Clean the portable extractor with disinfectant. Clean the recovery tank and spray with disinfectant.		
12. Remove the nonsterile gloves.		

The student has satisfactorily completed the procedure "CLEAN BLOOD/BODY SUBSTANCES FROM A CARPETED SURFACE" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) **Date**

Lesson 3: Floor Cleaning

Skill Sheet

CLEAN BLOOD/BODY SUBSTANCES FROM A HARD FLOOR SURFACE

Student Name _____ Date _____

EQUIPMENT:

1. Nonsterile gloves
2. Two wet-mop heads
3. Two mop buckets with wringers
4. Disinfectant floor cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select appropriate equipment.		
2. Place clean rinse water in one mop bucket.		
3. Put on nonsterile gloves.		
4. Fill second mop bucket with water.		
5. Add germicide/disinfectant solution according to facility policy.		
6. Place wet floor signs at each end of the work area.		
7. Mop up the spill. Rinse the mop in the clean rinse water and wring it out until the entire spill has been mopped up.		
8. Use a clean mop head to wet the mop in the germicide/disinfectant solution.		
9. Wring mop head enough to prevent dripping and pooling of the solution on the floor.		
10. Mop the floor. Turn the mop over when one side becomes dirty.		
11. Empty the dirty water when the area has been completed.		
12. Clean the buckets, wringers, and mop cart.		
13. Place dirty mop heads in a bag and send to laundry.		
14. Remove nonsterile gloves.		
15. Wash hands.		
16. Return all chemicals and equipment to the proper storage location.		
17. Pick up wet floor signs when the area has dried.		

The student has satisfactorily completed the procedure "CLEAN BLOOD/BODY SUBSTANCES FROM A HARD FLOOR SURFACE" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature
(Verifying Satisfactory Completion)

Date

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. Which of the following is NOT the proper way to treat clients' personal items?

   a. Make positive comments about personal items.
   b. Discard personal items left in the room.
   c. Use care when dusting to keep from breaking a personal item.
   d. Watch for personal items left in the bed.

2. In health care terms, the word **discharge** means:

   a. A client will not need to have his or her linens changed daily.
   b. The health care facility where a housekeeper works is closing.
   c. A client is not returning to a particular room.
   d. The housekeeper has been asked to leave.

3. The deep cleaning of a client's room needs to be done:

   a. Every day the client is in a room.
   b. Whenever the facility is getting ready for state inspection.
   c. On a rotating basis that may be scheduled monthly or quarterly.
   d. When the client requests a deep cleaning of the room.

4. When cleaning an isolation room, which of the following procedures is NOT correct?

   a. Remove protective clothing before leaving the isolation room.
   b. Bag all cleaning clothes, wet mop heads, and dust mop heads.
   c. Use the type of personal protective equipment indicated on the sign posted outside the door.
   d. Use caution with trash and dispose of it according to facility guidelines.

5. When is the appropriate time to clean the common areas such as the nurses station and conference rooms?

   a. Clean when many people are in them so they can tell the housekeeper what areas need to be cleaned.
   b. Clean when the least amount of people are in them so that the housekeeper does not not disturb the facility's visitors, staff, and clients.
   c. Any time is an appropriate time to clean the common areas.
   d. Any time they can be worked into the cleaning schedule.

6. Before a housekeeper makes an unoccupied bed, he or she should first:

   a. Wash his or her hands.
   b. Place mattress pad on the bed and pull smooth.
   c. Check with the director of nursing to determine where the client is.
   d. Wash and dry mattresses if they are soiled.

7. In a health care setting, isolation means that:

   a. The client is recovering from surgery.
   b. Adult clients are placed in a separate area than pediatric clients.
   c. The client has not yet been diagnosed with a disease.
   d. Special precautions are used to prevent the spread of a disease.

Lesson 1: Cleaning Client Rooms

Skill Sheet

COMPLETE DAILY CLEANING OF CLIENT ROOMS

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the room to be cleaned. Do not block the doorway.		
2. Knock before entering the room.		
3. Greet the client and any visitors in a friendly, courteous manner. Identify yourself and explain why you are there.		
4. If a doctor, nurse, minister, or other clinical person is with the client and they are performing a procedure or having a discussion, excuse yourself and explain that you will come back at a more convenient time.		
5. Take only the supplies and equipment needed into the client room.		
6. Put on gloves.		
7. Dust mop the room.		
8. Empty, clean, and reline all trash cans.		
9. Check all dispensers (e.g., soap, paper towel, lotion). Clean and refill them as needed.		
10. Damp dust the outside surface of all furniture except the client bed. Do not open drawers or disturb the clients' personal items. If it is necessary to move newspapers, magazines, flowers, or other articles to clean, handle them with care and return them to their original location.		
11. Spot clean all visible soil from walls, windows, and blinds. DO NOT dust directly over the client.		
12. Clean the telephone, including the cord, the dial plate, and the handpiece.		

13. Leave your name card by the telephone if this is practiced in your facility.		
14. Clean all bathroom fixtures and mirrors.		
15. Wet mop the floor.		
16. Spot clean visible soil from the room door.		
17. Let the client, family, or visitors know that you are finished and thank them. Remind them that the floor will be slippery until it is completely dry and ask them to use caution.		
18. Post a wet floor sign at the entrance and leave it there while you clean the next room. By the time you need the sign for the next room, the floor in this room should be dry.		
19. Bag all soiled mop heads and cleaning cloths for daily laundering. Use clean ones for the next room.		
20. Change the germicidal solution in the mop bucket if it is excessively dirty, or if this is the fourth room for which it has been used. Follow your facility policy for how frequently the mop bucket water should be changed.		
21. Note any damaged equipment, walls that require further cleaning, or damaged floor or wall surfaces. Report these to the housekeeping supervisor so they can be scheduled for repair.		
22. Remove gloves and dispose of them in the trash container.		
23. Go to the next room.		
24. Wash hands before beginning.		

The student has satisfactorily completed the procedure "COMPLETE DAILY CLEANING OF CLIENT ROOMS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

Lesson 1: Cleaning Client Rooms

Skill Sheet

MAKE AN UNOCCUPIED BED

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Clean linens
3. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Wash hands.		
2. Gather linens and place in order to be used.		
3. Identify and greet client (if client is in room).		
4. Identify self.		
5. Explain what you are going to do.		
6. Wash hands.		
7. Put on gloves.		
8. Position bed flat, raise to comfortable working height, and lower bed rails.		
9. Strip pillowcase off pillow and place pillow out of way.		
10. Strip bed and place linen in soiled linen receptacle.		
11. Wash and dry mattress, if soiled.		
12. Remove and appropriately dispose of gloves.		
13. Wash hands.		
14. Place mattress pad on bed and pull smooth.		
15. Unfold bottom sheet on bed to full length, with bottom hem at bottom edge of mattress. NOTE: For fitted sheets, both corners should be secured onto mattress.		
16. Tuck bottom sheet under head of mattress and miter corner.		
17. Tuck in bottom sheet along side of bed, working from head to foot.		

18. Place draw sheet or protective pad on middle third of mattress (if needed) and tuck in near side only.		
19. Place top sheet, halved, on full length of bed, with hem at edge of head end of mattress.		
20. Unfold top sheet.		
21. Place blanket over top sheet centered on bed and about eight (8) inches down from edge of top sheet.		
22. Place bedspread (centered) over top sheet and blanket, leaving enough bedspread to cover pillow at top edge.		
23. At foot of bed, miter corners of bottom sheet only and tuck under foot of bed.		
24. Gather one side of pillowcase from open end to seamed end.		
25. Grasping seamed end of case, allow gathers to fall back over your wrist.		
26. Grasp edge of pillow through pillowcase and, holding it securely, work gathered pillowcase down over pillow.		
27. Place pillow on near half of bed with open end of pillowcase away from doorway.		
28. Go to other side of bed and fold back each piece of linen.		
29. Pull mattress pad smooth and tuck under mattress from head to foot.		
30. Pull bottom sheet tight (or if using fitted sheet, pull corners down over mattress); tuck under head of mattress; miter corner; and tuck in remainder of sheet from head to foot.		
31. Tighten draw sheet; tuck in middle first, then top ⅓, and finally bottom ⅓.		
32. Pull top sheet, blanket, and bedspread straight; tuck them under foot of mattress.		
33. Miter corners of top sheet, blanket and bedspread together; allow sides to hang free.		
34. Place pillow in center of head of bed; pull bedspread over it if bed is to be closed or fanfold all top linens to foot of bed if bed is to be open.		
35. Lower bed and return bed crank handle to stored position, if applicable.		
36. Raise bed rail as directed by facility.		

The student has satisfactorily completed the procedure "MAKE AN UNOCCUPIED BED" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 1: Cleaning Client Rooms

Skill Sheet

CLEAN CLIENT ROOMS UPON DISCHARGE

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Empty all trash cans, thoroughly disinfect the trash cans, and replace liners.		
2. Dispose of patient care items not taken by the client at discharge. Any personal items found should be labeled and turned in to the housekeeping supervisor to be returned to the client.		
3. Remove equipment (e.g., IV pump, suction machine, bedside commode, etc.) and return to the soiled utility room to be disinfected.		
4. Strip the bed of linen and place it into a linen bag. DO NOT place soiled linen on the floor. Put the soiled linen in the appropriate place.		
5. Dust mop the floor.		
6. Disinfect all furniture (including the television, telephone, overbed table, bedside table, overbed lights, etc.) in the room beginning to the right of the door, working your way around the entire room.		
7. Wash the entire bed.		
8. Visually inspect all wall surfaces for cleanliness. Remove and disinfect any spots on the walls.		
9. Visually inspect cubicle curtains and drapes for cleanliness. If soiled areas are found, remove the curtains and bag for laundering. Replace with clean curtains.		
10. Clean all fixtures in the bathroom.		
11. Check all dispensers. (e.g., soap, paper towel, lotion) Clean and refill them, as needed.		
12. Wet mop all hard floor surfaces or vacuum carpeted surfaces.		
13. Place wet floor sign at the door until floor is thoroughly dry.		

14. Return all furniture to the proper arrangement.		
15. Make the bed.		
16. Check the condition of. and replenish items left in client rooms. (information cards, bible, telephone book, etc.)		
17. Notify the appropriate personnel that the room is clean and ready for the next admission.		

The student has satisfactorily completed the procedure "CLEAN CLIENT ROOMS UPON DISCHARGE" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) _____ Date _____

Lesson 1: Cleaning Client Rooms

Skill Sheet

COMPLETE DEEP CLEANING IN CLIENT ROOMS

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Standard floor machine
3. Vacuum cleaner

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Empty all trash cans, thoroughly disinfect the trash cans, and replace liners.		
2. Strip the bed of linen and place it into a linen bag. DO NOT place soiled linen on the floor. Put the soiled linen in the appropriate place.		
3. Dust mop the floor.		
4. Thoroughly clean all furniture in the room including the television, telephone, overbed table, bedside table, overbed lights, etc.		
5. Wash the entire bed.		
6. Remove furniture from the client room for floor care.		
7. Clean all fixtures in the bathroom.		
8. Check all dispensers. (e.g., soap, paper towel, lotion) Clean and refill them, as needed.		
9. Completely wipe down plastic shower curtains. Remove and replace fabric shower, cubicle, or window curtains that are not clean. Bag them for laundering.		
10. Completely wash all walls, ceilings, windows, blinds and other vertical surfaces including door and window frames and closets.		
11. Schedule any necessary room repairs with Maintenance department.		
12. Complete thorough floor cleaning.		
13. Perform hard floor care cleaning: Top scrub and re-coat floor or strip and re-coat floor as directed by housekeeping supervisor.		

14. Perform carpeted floor care tasks. Clean carpet by wet extraction, dry extraction, or bonnet extraction as directed by housekeeping supervisor.		
15. Place wet floor sign at the door until floor is thoroughly dry.		
16. Return all furniture to the proper arrangement.		
17. Make the bed.		
18. Check the condition of and replenish items left in client rooms (information cards, bible, telephone book, etc.).		

The student has satisfactorily completed the procedure "COMPLETE DEEP CLEANING IN CLIENT ROOMS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) — Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN PUBLIC RESTROOMS

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the restroom to be cleaned.		
2. Place a sign just outside the restroom being cleaned to notify guests that it will not be available for a short time while it is being cleaned.		
3. Check the restroom for guests currently using the restroom. Wait until all guests have finished.		
4. Put on gloves and other protective equipment.		
5. Clean each toilet and/or urinal thoroughly.		
6. Clean each sink.		
7. Clean mirrors.		
8. Empty, clean, and reline all trash cans.		
9. Check all dispensers (e.g., soap, paper towels, lotion, toilet paper). Clean and refill them, as needed.		
10. Spot clean restroom walls and doors and walls of the stalls.		
11. Dust mop the restroom floor.		
12. Damp mop the restroom floor. Pay particular attention to corners and edges.		
13. Place a wet floor sign at the door. Leave the sign in place until the floor is thoroughly dry.		
14. Remove gloves and other protective equipment.		

The student has satisfactorily completed the procedure "CLEAN PUBLIC RESTROOMS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) **Date**

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN SOILED OR CLEAN UTILITY ROOM

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the room to be cleaned.		
2. Put on gloves.		
3. Dust mop the floor.		
4. Damp dust surfaces in the room, such as counter tops.		
5. Clean the sink if there is one in the room.		
6. Check all dispensers (e.g., soap, paper towel, lotion, toilet paper). Clean and refill them, as needed.		
7. Clean the hopper (usually only found in the soiled utility room). A hopper is shaped like a large toilet and should be cleaned using the same procedure as a toilet.		
8. Empty, clean, and reline all trash cans.		
9. Spot clean walls and doors in the room.		
10. Damp mop the floor.		
11. Place a wet floor sign at the doorway until the floor is thoroughly dry.		
12. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN SOILED OR CLEAN UTILITY ROOM" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN REPORT ROOM, BREAK ROOM, AND NURSES STATION

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the room to be cleaned.		
2. Put on gloves.		
3. Dust mop the floor if it is a hard floor surface.		
4. Damp dust surfaces in the room such as counter tops, tables, telephone, etc.		
5. Clean the sink if one is present in the room.		
6. Check all dispensers (e.g., soap, paper towel, lotion, toilet paper). Clean and refill them as needed.		
7. Empty, clean, and reline all trash cans.		
8. Spot clean walls in the room and the doors.		
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.		
10. Place a wet floor sign at the doorway of a hard floor surface until it is thoroughly dry.		
11. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN REPORT ROOM, BREAK ROOM, AND NURSES STATION" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN LOBBY

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart in the lobby but out of the flow of traffic.		
2. Put on gloves.		
3. Dust mop the floor if it is a hard floor surface.		
4. Damp dust surfaces in the room such as vinyl-covered chairs, tables, telephone, etc.		
5. Clean wood furniture using polish according to facility policy.		
6. Pick up magazines and other reading material and replace in magazine racks or arrange neatly on end tables. Dispose of outdated copies or those in poor condition.		
7. Empty, clean, and reline all trash cans.		
8. Spot clean walls in the room and the doors.		
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.		
10. Place a wet floor sign at the doorway of a hard floor surface until the floor is thoroughly dry.		
11. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN LOBBY" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN DINING ROOM

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart in the dining room but out of the flow of traffic.		
2. Put on gloves.		
3. Empty, clean, and reline all trash cans.		
4. Dust mop the floor.		
5. Prepare a bucket with germicidal solution according to facility policy.		
6. Clean the tops of the tables and the vinyl-covered chairs with a cleaning cloth and germicidal solution.		
7. Damp dust or clean any other furniture in the dining room with furniture polish.		
8. Damp mop the floor.		
9. Place a wet floor sign at all entry ways to the dining room until the floor is thoroughly dry.		
10. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN DINING ROOM" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN OFFICE OR CONFERENCE ROOMS

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the room to be cleaned.		
2. Knock on the door to be sure the room is not in use or that it is a convenient time to clean.		
3. Put on gloves.		
4. Empty, clean, and reline all trash cans.		
5. Dust mop the floor if it is a hard floor surface.		
6. Damp dust all surfaces in the room.		
7. Clean wood furniture using furniture polish according to facility policy.		
8. Spot clean walls and doors in the room.		
9. Damp mop the floor if it is a hard floor surface or vacuum if it is carpet.		
10. Place a wet floor sign at the doorway if a hard floor surface until the floor is thoroughly dry.		
11. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN OFFICE OR CONFERENCE ROOMS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN SHOWER OR TUB ROOM

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart just outside the doorway of the shower or tub room.		
2. Put on gloves.		
3. Empty, clean, and reline all trash cans.		
4. Clean tub.		
5. Clean shower.		
6. Clean sink (if present).		
7. Clean mirror (if present).		
8. Clean toilet (if present).		
9. Spot clean walls and doors in the room.		
10. Damp mop the floor.		
11. Place a wet floor sign at the doorway if the floor is a hard surface until the floor is thoroughly dry.		
12. Remove gloves.		

The student has satisfactorily completed the procedure "CLEAN SHOWER OR TUB ROOM" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN ELEVATOR

Student Name _____ Date _____

EQUIPMENT:

1. Spray bottle with all-purpose cleaner
2. Cleaning cloths
3. Putty knife
4. Gum remover
5. Vacuum
6. Step ladder
7. Service key
8. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Select the appropriate equipment. Spray bottle with all-purpose cleaner, cleaning cloths, putty knife, gum remover, vacuum, step ladder, service key.		
2. Call elevator to the floor on which you are working. Using the service key, open the service panel box and turn the service switch to the "on" position.		
3. Place the step ladder in the center of the elevator.		
4. Put on gloves.		
5. Remove the plastic cover from the lights in the top of the elevator.		
6. Clean the entire ceiling using the all-purpose cleaner and cleaning cloth.		
7. Clean the walls of the elevator using the all-purpose cleaner and cleaning cloth.		
8. Dry polish the stainless steel using a dry cleaning cloth before the solution dries.		
9. Check the carpet for any stains or gum. If gum is found, apply gum remover and remove the gum using a putty knife.		
10. Vacuum the carpet in the elevator. Dust mop followed by damp mopping if it is a hard floor surface.		

11. Remove gloves.		
12. Turn the service switch to the "off" position to return the elevator to service.		
13. Return equipment to storage.		

The student has satisfactorily completed the procedure "CLEAN ELEVATOR" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) _____ Date _____

Lesson 2: Cleaning Areas of the Facility other than Client Rooms

Skill Sheet

CLEAN DRINKING WATER FOUNTAIN

Student Name _____ Date _____

EQUIPMENT:

1. Housekeeper's cleaning cart
2. Gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Place the cleaning cart next to the water fountain.		
2. Put on gloves.		
3. Apply germicidal solution to the fountain head, bowl, handle, etc.		
4. Use a clean cloth to wipe all parts of the fountain including the exterior.		
5. Operate the fountain briefly to flush any of the germicidal solution out of the fountain head.		
6. Select stainless steel polish. Polish all metal areas of the unit. The fountain should shine and show no water marks.		
7. Remove gloves.		
8. Report any poor operation of the fountain to maintenance department.		

The student has satisfactorily completed the procedure "CLEAN DRINKING WATER FOUNTAIN" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Written Unit Evaluation

Student Name_____ Date_____

Circle the letter that corresponds to the best answer.

1. Why should gloves and a gown be worn when sorting laundry that is heavily soiled with blood and body fluids?

   a. To protect the clients.
   b. To protect the nurses.
   c. To protect the housekeeper.
   d. To protect the doctors.

2. When lifting a heavy object, such as a bag of laundry, it is important to:

   a. Squat, bending at the knees.
   b. Keep the legs straight.
   c. Bend at the waist.
   d. Hold object away from the body.

3. Which of the following would NOT be a safety hazard found in the laundry room?

   a. Sharp objects
   b. Moving parts
   c. Hot temperatures
   d. Body mechanics

4. What does **industrial strength** mean when used to describe a cleaner?

   a. The cleaner can only be used on fabrics that are very durable.
   b. A housekeeper must be certified to use the product.
   c. The cleaner is more concentrated than the products typically used in a home.
   d. The cleaner can only be used in large manufacturing plants.

5. Why does a stain need to be treated before being placed in the washing machine?

   a. It might spread microorganisms to the other items being washed.
   b. It might set in the fabric and become impossible to remove later.
   c. It is a requirement of the local state health agency.
   d. It might ruin other items being washed.

6. Besides putting an item into the dryer, how else could a housekeeper dry it?

   a. Iron it.
   b. Hang it.
   c. Lay it out on a client's bed.
   d. Blow it dry with a hair dryer.

7. To prevent wrinkles, when should clothes and linens be folded after being dried?

   a. Immediately
   b. When they have cooled
   c. When they are ready to be taken to a client's room
   d. When time is available

8. What should a housekeeper look for in a client's clothes after laundering them?

   a. Any stains that should be treated
   b. Money that the housekeeper is allowed to keep
   c. Nothing; the clothing should just be returned
   d. Tears or other signs of wear

9. Why must linens remain covered when being transported from the laundry area to the various health facility units?

   a. It is necessary to keep clients from taking their clothes.
   b. It is a tradition that hospitals do not want to change.
   c. It is a way to keep contaminants off the clean linens.
   d. It is a law that every health care facility must follow.

10. Why is it so important to keep a laundry room clean?

    a. To prevent the spread of microorganisms
    b. To make a good impression on visitors
    c. To keep physicians and nurses happy
    d. To minimize the amount of lost clothing

Match the laundry chemicals in Column B with their description in Column A.

COLUMN A	COLUMN B
_____ 11. A chemical that returns the normal pH (acid or base) to the clothes.	a. Laundry detergent
_____ 12. A chemical used to clean dirt from clothes.	b. Fabric softener
_____ 13. A hypochloride solution that helps remove stains from white clothing.	c. Static
_____ 14. A chemical attraction of a piece of clothing to another or to the person wearing it.	d. Neutralizer rinse
_____ 15. A chemical used to make clothes feel less stiff.	e. Bleach
_____ 16. Chemicals used before detergent and bleach to make a stain easier to wash out.	f. Cleaning agent

Lesson 2: Laundry Procedures

Skill Sheet

COLLECT PERSONAL CLOTHING FOR LAUNDERING

Student Name _____ Date _____

EQUIPMENT:

1. Laundry bag
2. Laundry cart
3. Non-sterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Wash your hands.		
2. Select the appropriate laundry bag and non-sterile gloves.		
3. Put on the non-sterile gloves.		
4. Knock before entering the residents' room. Explain that you are there to pick up soiled laundry.		
5. Pick up the soiled laundry from each residents' closet or wherever soiled laundry is placed in a particular facility.		
6. Place the soiled laundry into the laundry bag.		
7. Go to each room to pick up the soiled laundry. Personal laundry will usually be picked up daily.		
8. Place the bags of soiled laundry into a laundry cart when all the personal laundry on a unit has been picked up.		
9. Push the laundry cart to the laundry room.		
10. Remove the non-sterile gloves.		
11. Wash hands.		

The student has satisfactorily completed the procedure "COLLECT PERSONAL CLOTHING FOR LAUNDERING" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Laundry Procedures

Skill Sheet

COLLECT SOILED LINENS FROM NURSING UNITS

Student Name _____ Date _____

EQUIPMENT:

1. Laundry cart
2. Non-sterile gloves

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Find a laundry cart for soiled linens.		
2. Wash hands.		
3. Put on non-sterile gloves.		
4. Push the laundry cart to the room where the soiled linens have been placed.		
5. Load all bags of soiled linen into the laundry cart. NOTE: Remember to use good body mechanics when lifting heavy bags of linen.		
6. Push laundry cart to the laundry room.		
7. Remove non-sterile gloves.		
8. Wash hands.		

The student has satisfactorily completed the procedure "COLLECT SOILED LINENS FROM NURSING UNITS" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Laundry Procedures

Skill Sheet

SORT LAUNDRY

Student Name _____ Date _____

EQUIPMENT:

1. Non-sterile gloves
2. Gown
3. Cleaning agent (for pre-treating stains)

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Put on non-sterile gloves and a gown.		
2. Empty the bag of laundry.		
3. Place the items into separate barrels labeled with the major categories of clothes/linens or sort into piles.		
4. Observe each item for stains that need to be pre-treated or for repairs that need to be completed.		
5. Pre-treat stains. (See separate procedure for treating stains.)		
6. Rinse heavily soiled items to remove most of the body substance.		
7. Sort all bags of clothing.		
8. Weigh the linen cart of sorted, soiled laundry.		
9. Push carts, baskets, or barrels of sorted laundry to the washing machine area.		
10. Remove gloves and gown.		
11. Wash hands.		

The student has satisfactorily completed the procedure "SORT LAUNDRY" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Laundry Procedures

Skill Sheet

REMOVE STAINS FROM LAUNDRY ITEMS

Student Name _____ Date _____

EQUIPMENT:

1. Non-sterile gloves
2. Gown
3. Cleaning agent
4. Pad or cleaning cloth

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Put on gloves and a gown.		
2. Take the garment to a well-lit area.		
3. Examine the stain to determine what substance caused it, if possible.		
4. Determine the type of fabric and how that fabric will react to the cleaning agent.		
5. Apply the cleaning agent on a test area. A **test area** is a location that is hidden to determine how the fabric will respond to the cleaning agent.		
6. Apply the cleaning agent with a squeeze or spray bottle while placing the stained portion over a pad or clean cloth if the fabric is a delicate fabric.		
7. Allow the cleaning agent time to penetrate the stained area thoroughly. Avoid excessive friction, especially on silk and rayon fabrics.		
8. Rinse the fabric thoroughly with water to remove the cleaning agent.		
9. Place the garment in the proper pile for laundering.		
10. Remove gloves and gown.		
11. Wash hands.		

The student has satisfactorily completed the procedure "REMOVE STAINS FROM LAUNDRY ITEMS" according to the steps outlined.

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion)	**Date**

Lesson 2: Laundry Procedures

Skill Sheet

WASH LAUNDRY

Student Name _____ Date _____

EQUIPMENT:

1. Non-sterile gloves
2. Gown
3. Laundry detergent

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Wash hands.		
2. Put on non-sterile gloves and a gown.		
3. Load pre-sorted and spot-stained laundry into the washing machine.		
4. Place laundry detergent into the washing machine according to facility policy. If the washing machine has a chemical injection system, set the proper program for the load of clothes.		
5. Close the washer door and be sure it has latched (in a commercial machine).		
6. Select the load size (on a standard machine).		
7. Select the water temperature (on a standard machine).		
8. Press the start mechanism.		
9. Remove gloves and gown.		
10. Wash hands.		

The student has satisfactorily completed the procedure "WASH LAUNDRY" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Laundry Procedures

Skill Sheet

DRY LAUNDRY

Student Name _____ Date _____

CHECK IF STUDENT DID THE FOLLOWING	YES	NO
1. Open the door on the washing machine.		
2. Remove the laundry from the washing machine.		
3. Place the laundry into a rolling cart or clothes basket.		
4. Place the laundry into the dryer.		
5. Remove the lint from the lint trap.		
6. Set the load size and the heat setting on the dryer.		
7. Press the start button.		
8. Check the laundry periodically to determine if they are dry.		
9. Remove laundry from the dryer as soon as they are dry to touch.		
10. Iron or fold the laundry and return to the appropriate area of the facility.		

The student has satisfactorily completed the procedure "DRY LAUNDRY" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Lesson 2: Laundry Procedures

Skill Sheet

LAUNDER ITEMS FROM AN ISOLATION ROOM

Student Name _____ Date _____

CHECK IF THE STUDENT DID THE FOLLOWING	YES	NO
1. Put the whole bag into the washing machine if the bag is of washable (biodegradable) material. If the bag is not washable, put the bag into the machine and peel back the bag from the laundry, leaving the laundry inside the machine.		
2. Run the laundry through the wash cycle two times.		

The student has satisfactorily completed the procedure "LAUNDER ITEMS FROM AN ISOLATION ROOM" according to the steps outlined.

_____ _____

Instructor's/Approved Clinical Supervisor's Signature (Verifying Satisfactory Completion) Date

Housekeeper in Health Care Facilities Competency Record

Name: _____

Directions: Evaluate the student by entering the appropriate number to indicate the degree of competency.

Rating Scale (0-6):

0 **No Exposure** - no experience/knowledge in this area; program/course did not provide instruction in this area

1 **Unsuccessful Attempt** - unable to meet knowledge or perform criteria and/or required significant assistance

2 **Partial Demonstration** - met some of the knowledge or performance criteria with or without minor assistance

3 **Knowledge Demonstrated** - met knowledge criteria without assistance at least once

4 **Performance Demonstrated** - met performance criteria without assistance at least once

5 **Repetitive Demonstration** - met performance and/or knowledge criteria without assistance on multiple occasions

6 **Mastered** - successfully applied knowledge or skills in this area to solve related problems independently

(IBM) 6-99

NOTE: The code in parentheses is the competency identification number used in computerized management systems.

☐ Successfully completed the Health Care Assistant Core Competencies

0-6	Date	A. Introduction to Housekeeping
		1. Practice within the job description of your employer. (A001)
		2. Follow the chain of command. (A002)
		3. Dress appropriately. (A003)
		4. Use proper hygiene. (A004)
		5. Work as a member of the housekeeping team. (A005)
		Other _____
		_____

0-6	Date	B. Interpersonal Relations
		1. Maintain client confidentiality. (B001)
		2. Respect clients' rights. (B002)
		3. Provide effective customer service. (B003)
		4. Practice common courtesy to enhance customer relations. (B004)
		5. Report client situations appropriately. (B005)
		6. Report building and equipment maintenance needs. (B006)
		Other _____
		_____

0-6	Date	C. Infection Control and Safety
		1. Maintain a safe work environment. (C001)
		2. Locate MSDS in your facility. (C002)
		3. Use safe work habits when operating electrical equipment. (C003)
		4. Use a ladder appropriately. (C004)
		5. Use cleaning chemical according to label directions. (C005)
		6. Store chemicals appropriately. (C006)
		7. Label secondary cleaning container. (C007)

0-6	Date	C. Infection Control and Safety (continued)
		8. Select appropriate Personal Protective Equipment when using cleaning chemicals. (C008)
		9. Use standard and transmission-based precautions appropriately. (C009)
		10. Select appropriate Personal Protective Equipment to prevent the spread of infection. (C010)
		11. Transport and dispose of infectious hazardous waste appropriately. (C011)
		12. Report client situations appropriately. (C012)
		Other _____

0-6	Date	D. General Cleaning Procedures
		1. Operate equipment appropriately. (D001)
		2. Empty trash safely. (D002)
		3. Damp dust surfaces. (D003)
		4. Clean glass surfaces and mirrors. (D004)
		5. Clean sink. (D005)
		6. Clean toilet. (D006)
		7. Complete detailed wall cleaning. (D007)
		8. Clean ceilings, overhead lights, and vents. (D008)
		9. Clean shower. (D009)
		10. Clean tub. (D010)
		11. Clean client bed. (D011)
		12. Dust mop floor. (D012)
		13. Damp mop floor. (D013)
		14. Clean blinds. (D014)
		15. Vacuum carpeted floors. (D015)

0-6	Date	D. General Cleaning Procedures (continued)
		16. Clean overbed and bedside table. (D016)
		17. Clean furniture. (D017)
		18. Use proper body mechanics while cleaning. (D018)
		19. Check for repair and replacement needs. (D019)
		20. Top scrub and recoat floors. (D020)
		21. Strip and recoat floors. (D021)
		22. Spray buff floors. (D022)
		23. Use safety precautions when cleaning floors. (D023)
		24. Clean carpet by using wet extraction. (D024)
		25. Clean carpet by using the dry extraction method. (D025)
		26. Clean carpet by using bonnet extraction. (D026)
		27. Clean blood or body substance from carpeted area. (D027)
		28. Clean blood or body substance from hard floor surface. (D028)
		29. Clean spot from carpet. (D029)
		Other _____
		_____

0-6	Date	E. Cleaning Areas Within a Facility
		1. Treat clients' personal items with respect. (E001)
		2. Complete daily cleaning in client rooms. (E002)
		3. Complete deep cleaning of client rooms. (E003)
		4. Clean client room upon discharge. (E004)
		5. Make unoccupied bed. (E005)
		6. Clean isolation rooms. (E006)
		7. Clean public restrooms. (E007)
		8. Clean soiled and clean utility rooms. (E008)
		9. Clean report room, break rooms, and nurses station. (E009)
		10. Clean lobby. (E010)
		11. Clean dining room. (E011)
		12. Clean office or conference room. (E012)
		13. Clean shower or tub room. (E013)
		14. Clean elevators. (E014)
		15. Clean drinking water fountains. (E015)
		Other _____
		_____

0-6	Date	F. Laundry
		1. Wear Personal Protective Equipment in the laundry. (F001)
		2. Use proper body mechanics when lifting laundry. (F002)
		3. Handle chemicals in the laundry carefully. (F003)
		4. Use laundry chemicals according to directions. (F004)
		5. Collect personal clothing for laundering. (F005)
		6. Collect soiled linens from the nursing units. (F006)
		7. Sort laundry. (F007)
		8. Remove stains from laundry items. (F008)
		9. Wash laundry. (F009)
		10. Dry laundry. (F010)
		11 Fold or hang laundry. (F011)
		12. Launder items from an isolation room. (F012)
		13. Restock clean linen closet/cart. (F013)
		14. Return personal clothing to client room. (F014)
		15. Clean laundry room. (F015)
		Other _____
		_____

Certificate of Achievement

This is to certify that

_____

Achieved the Competencies as Acknowledged for
Housekeeper in Health Care Facilities

And is Therefore Recognized

This _____ Day of _____, 19 ____

_____ Instructor

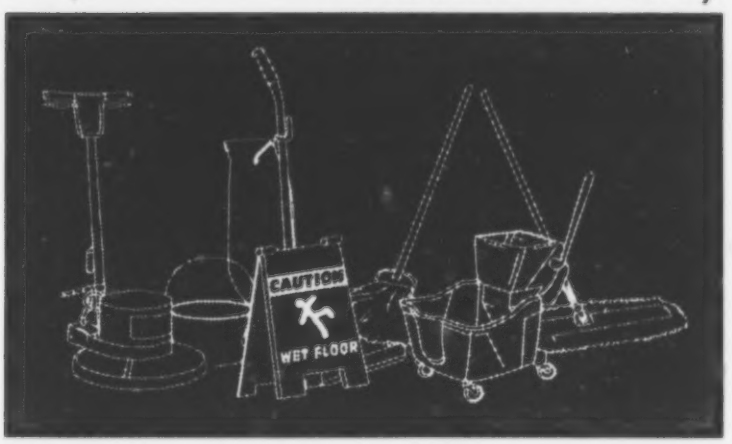
_____ Administrator

INSTRUCTIONAL MATERIALS LABORATORY
UNIVERSITY OF MISSOURI-COLUMBIA

50-1146-K

HOUSEKEEPER IN HEALTH CARE FACILITIES

Instructor Key



Housekeeper in Health Care Facilities

Instructor Key

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Table of Contents

Instructional Strategies v

Competency Crosswalk vii

Answers to Activity Sheets and Written Evaluations

Unit I: Introduction to Housekeeping 1
- Lesson 1: The Role of the Housekeeper 1
- Lesson 2: Employment in a Health Care Setting 2
- Lesson 3: Developing Professionalism 3
- Written Unit Evaluation Answers 4

Unit II: Interpersonal Relations 4
- Lesson 1: Respecting Clients 4
- Lesson 2: Customer Service 5
- Lesson 3: Communicating with Others 5
- Written Unit Evaluation Answers 7

Unit III: Infection Control and Safety 7
- Lesson 1: Safe Work Environment 7
- Lesson 2: Working with Cleaning Chemicals 8
- Lesson 3: Infection Control 9
- Lesson 4: Preventing and Responding to Emergencies 10
- Written Unit Evaluation Answers 10

Unit IV: General Cleaning Procedures 11
- Lesson 1: Housekeeping Equipment 11
- Lesson 2: Routine Cleaning Tasks 11
- Lesson 3: Floor Cleaning 11
- Written Unit Evaluation Answers 12

Unit V: Cleaning Areas within a Facility 12
- Lesson 1: Cleaning Client Rooms 12
- Lesson 2: Cleaning Areas of the Facility other than Client Rooms 13
- Written Unit Evaluation Answers 13

Unit VI: Laundry 13
- Lesson 1: Safety 13
- Lesson 2: Laundry Procedures 14
- Lesson 3: Distributing Laundry Items and Cleanup 14
- Written Unit Evaluation Answers 15

Instructional Strategies

This *Housekeeper in Health Care Facilities* Instructor Key is designed to be used with the *Housekeeper in Health Care Facilities* Student Manual. It provides answers to the activity sheets and unit evaluations. The content was developed with input from secondary health occupations education instructors, housekeeping supervisors, and personnel from the Missouri Department of Elementary and Secondary Education and the Instructional Materials Laboratory at the University of Missouri-Columbia.

The self-instructional format provides health occupations education instructors the opportunity to address the needs of students whose health career interest is outside of the nursing field. The student materials have been written to accommodate individuals with special needs. Following completion of the Health Care Assistant Core Competencies, a student interested in pursuing a career in the housekeeping field can achieve housekeeping specific competencies through this curriculum. Successful completion prepares the student for an entry-level position as a housekeeper in health care facilities as well as a solid knowledge and skill base to continue education in a housekeeping career.

The *Housekeeper in Health Care Facilities* curriculum is primarily designed to be used independently by students who are in secondary health occupations programs or by individuals receiving on-the-job training in housekeeping. Instructors should set-up parameters for the individualized instruction, oversee the knowledge component of instruction (including the written unit evaluations), and identify a clinical site and a clinical supervisor. The clinical supervisor should be responsible for supervising the student while at the clinical site, providing skill training, and evaluating mastery of skills.

Since mastery of the information and skills will be evaluated using the Written Unit Evaluations (pink) and the Skill Sheets (pink), it is recommended that these pages be removed before the manual is given to the student. These pages are located together at the end of the manual.

A Housekeeper in Health Care Facilities Competency Record Sheet and a Certificate of Achievement have also been included at the end of the student manual. These could be removed and filed with the evaluation instruments.

The student manual is divided into six units: Introduction to Housekeeping, Interpersonal Relations, Infection Control and Safety, General Cleaning Procedures, Cleaning Areas within a Facility, and Laundry. Units are further divided into lessons, which contain lesson objectives, key terms, content information, illustrations, and activity sheets as appropriate for the content. Activity Sheets are designed to assist the learner in mastering the information in each lesson. They also contain clinical/laboratory activities. Instructors or supervisors should review or discuss these activities with students. The Activity Sheets may or may not be graded depending on the instructor's preference.

Each unit has a written evaluation, which should be administered after all lessons in the unit are studied. A score of 80 percent is needed for mastery of the information in the unit. Skill sheets provide a record of mastery of the steps in the procedure for each skill. The student

should practice the skills outlined in the lessons before requesting evaluation of the skills. When evaluating mastery of skills, the clinical supervisor can determine that mastery is obtained when he or she feels confident in the student's ability to perform the skill without direct supervision.

A Unit Checklist, located at the end of each unit, provides a method for keeping track of Activity Sheets and Written Unit Evaluations to be completed in the unit.

In addition to being utilized in the secondary health occupations program to prepare housekeepers, the *Housekeeper in Health Care Facilities* curriculum, in conjunction with the *Health Care Assistant Core* curriculum, could be used in other ways as well:

*Health occupations education instructors may choose some units of instruction as an adjunct to teaching career opportunities in housekeeping.

*Housekeeping departments in health care facilities may use all or part of the curriculum in training students or new staff members.

Housekeeper in Health Care Facilities - Competency Crosswalk

Duty Band and Task Statement	SHOW-ME STANDARDS		CURRICULUM FRAMEWORKS					
	Knowledge (Content)	Performance (Goals)	Math	Communication Arts	Science	Social Studies	Health/ Physical Education	Fine Arts
A-1		4.4						
A-2		4.4						
A-3								
A-4								
A-5	CA1, CA6	2.3, 4.2, 4.4, 4.6		IV/9-12/3f				
B-1		4.4		IV/9-12/3f				
B-2	CA1, CA6	2.3, 4.4		II/9-12/5c IV/9-12/3e, 3f				
B-3	CA1, CA6	2.3, 2.6		II/9-12/5b II/9-12/6a				
B-4	CA1, CA6	2.3		II/9-12/5a, 5b, 5c				
B-5	CA1, CA6	2.2, 2.3, 2.6		II/9-12/3c II/9-12/5a, 5d II/9-12/6a				
B-6	CA1, CA6	2.3, 2.6		II/9-12/5a, 5d II/9-12/3a, 3c II/9-12/6a				
C-1	SC8	4.7					IIID/9-12/1a	
C-2		4.7						
C-3		4.7						
C-4		4.7						
C-5		4.7	IV/9-12/3					
C-6		4.7						
C-7	CA1, CA4, CA6	4.7		II/9-12/3a II/9-12/6a				

Duty Band and Task Statement	SHOW-ME STANDARDS		CURRICULUM FRAMEWORKS					
	Knowledge (Content)	Performance (Goals)	Math	Communication Arts	Science	Social Studies	Health/ Physical Education	Fine Arts
C-8		4.7						
C-9	HP3	4.7						
C-10		4.7						
C-11	SC8	4.7					IIID/9-12/1a	
C-12		4.7						
D-1								
D-2		4.7						
D-3								
D-4								
D-5								
D-6								
D-7								
D-8								
D-9								
D-10								
D-11								
D-12								
D-13								
D-14								
D-15								
D-16								
D-17								
D-18	HP4, SC2	4.7					IVD/9-12/2a	
D-19								

Duty Band and Task Statement	SHOW-ME STANDARDS		CURRICULUM FRAMEWORKS					
	Knowledge (Content)	Performance (Goals)	Math	Communication Arts	Science	Social Studies	Health/ Physical Education	Fine Arts
D-20								
D-21								
D-22								
D-23								
D-24		4.7						
D-25								
D-26								
D-27								
D-28	HP3	4.7						
D-29	HP3	4.7						
E-1								
E-2								
E-3								
E-4								
E-5								
E-6								
E-7								
E-8								
E-9								
E-10								
E-11								
E-12								
E-13								
E-14								

Duty Band and Task Statement	SHOW-ME STANDARDS		CURRICULUM FRAMEWORKS					
	Knowledge (Content)	Performance (Goals)	Math	Communication Arts	Science	Social Studies	Health/ Physical Education	Fine Arts
E-15								
F-1	HP3	4.7						
F-2	HP4	4.7					IVD/9-12/2a	
F-3		4.7						
F-4		4.7						
F-5								
F-6								
F-7								
F-8								
F-9								
F-10								
F-11								
F-12								
F-13								
F-14								
F-15								

Answers to Activity Sheets and Written Evaluations

NOTE: Answers are not provided for Clinical/Laboratory Activities. Review or discuss these activities with students.

Unit I: Introduction to Housekeeping

Lesson 1: The Role of the Housekeeper - Activity Sheet

1. To present the facility in a way that will give a positive first impression to clients and visitors.

2. a. To provide a clean, odor-free, pleasant appearing environment for clients, visitors, and staff
   b. To reduce the number and spread of microorganisms by using strict aseptic cleaning techniques

3. Vacuum carpets; dust and damp mop floors; clean rest rooms; dust furniture; empty trash; restock supplies; clean up spills; stripping and resurfacing floors; washing walls in client rooms; cleaning mini-blinds; taking down draperies for laundering

4. A job description tells the employee the skills that he or she is expected to perform in that job.

5. a. Y
   b. N
   c. N
   d. Y
   e. Y
   f. N
   g. Y
   h. Y
   i. N
   j. Y
   k. N
   l. Y

6. Answers should include five of the following:
   a. Hospital
   b. Long-term care facility
   c. Mental health facility
   d. Outpatient clinics
   e. Physician offices
   f. Dentist offices
   g. Offices of other allied health professionals

7. a. Medical units
   b. Surgical units
   c. Pediatric units
   d. Cardiac units

8. a. Radiology department
   b. Cardio-pulmonary services department
   c. Physical therapy or occupational therapy departments
   d. Laboratory

9. a. Obstetrics
   b. Intensive care
   c. Diagnostic areas

10. The chain of command refers to the organizational structure within a health care facility that defines who is responsible for specific duties within a department and who to report to when there is a problem or concern.

Lesson 2: Employment in a Health Care Setting - Activity Sheet

1. a. Joint Commission on Accreditation of Healthcare Organizations
   b. Occupational Safety and Health Administration
   c. Center for Disease Control
   d. Environmental Protection Agency

2. a. Independent, not-for-profit organization that accredits health care organizations
   b. Responsible for licensing long-term care facilities
   c. Sets health and safety standards to protect employees
   d. Conducts research, tracks statistics, and makes recommendations for controlling diseases
   e. Sets regulations and provides information about the proper disposal of hazardous material

3. a. Physical examination - assures the health care facility that the new employee can meet the physical demands of the job without causing harm to himself or herself or the clients assigned to his or her care
   b. Drug screening - identifies employees who use illegal drugs
   c. Criminal background check - convicted felons cannot work in health care facilities
   d. Hepatitis B vaccination - offered to reduce the risk of contracting the hepatitis B virus
   e. Other immunizations such as diphtheria, tetanus, polio, and rubella - required to protect clients and staff
   f. TB skin testing - detects if the employee has been exposed to the tuberculosis bacteria

4. The policy and procedure manual describes how a health care facility will handle issues within the facility and the steps that an employee should use to complete a specific procedure.

Lesson 3: Developing Professionalism - Activity Sheet

1. Behaviors exhibited by the housekeeper that allow those around him or her to think of him or her as professional

2. a. Caring attitude
   b. Dependable
   c. Respectful
   d. Honest
   e. Enthusiastic
   f. Courteous
   g. Well-groomed
   h. Practices good personal hygiene

3. Someone who can be counted on to do what is expected of him or her

4. Since the first impression that a staff member makes is often based solely on appearance, dress should be appropriate and safe for the work setting. Good personal hygiene reflects good personal health.

5. Good team leader, members who each know their job duties and perform them to a high quality standard at all times, who work to help one another, and who respect the differences among team members.

6. Answer should include five of the following:
   a. Know which job duties have been assigned to you
   b. Do your fair share
   c. Help other members of the team whenever you can
   d. Get to know the other members of the team
   e. Look for positive characteristics in other members of the team
   f. Respect differences in other team members
   g. Avoid gossip at all times
   h. Show appreciation

7. a. Opportunities to share current information about the profession
   b. Network of professionals to share ideas and get suggestions on problem solving
   c. Group of people to lobby with legislators when legislative issues arise within the profession
   d. Opportunities for continuing education

8. a. In-service opportunities provided by the health care facility
   b. Read professional journals
   c. Attend professional seminars
   d. Pursue formal education

Unit I: Introduction to Housekeeping - Written Unit Evaluation

1. c
2. a
3. d
4. d
5. c
6. b
7. d
8. d
9. a
10. b
11. c
12. c
13. a
14. e
15. c
16. f
17. b
18. a
19. d
20. d
21. b
22. a
23. e
24. c
25. a
26. b
27. b
28. a
29. a
30. b

Unit II: Interpersonal Relations

Lesson 1: Respecting Clients - Activity Sheet

1. a. To honor or hold in high esteem
   b. To keep client information private
   c. A legal document that tells family and health professionals the wishes of the client if they are unable to speak for themselves.

2. a. Do not repeat information overheard between a client and visitor or client and physician.
   b. Keep information shared by the client to the housekeeper in strict confidence.
   c. Do not gossip about clients with others.

3. a. Considerate and respectful care
   b. Right to privacy
   c. Right to confidentiality of the medical record and other communication

4. a. An appropriate response would be "I am unable to assist you back to bed, but I will let your nurse know you are ready to return to bed."
   b. An appropriate response would be "Put your call light on and your nurse will help you."
   c. An appropriate response would be "I can see you need assistance right away. Since no one has been able to help you yet, I will see if I can find your nurse and let him or her know of your need."
   d. An appropriate response would be "I am not allowed to get you anything from the vending machines, but I can let your nurse know that you would like something. They keep soda and snacks at the nurses station."

Lesson 2: Customer Service - Activity Sheet

1. External customers are those people outside the organization who choose the product or service a business offers. Examples of these include the client, the client's family, and the client's visitors.

2. Internal customers are those people who work within an organization and who rely on the services of a housekeeper in order to complete their job. These customers are the staff who work within the facility - the other members of the health care team.

3. Answer should include six of the following :
   a. Smile when greeting the client or visitor
   b. Speak in a pleasant tone of voice
   c. Listen to what the client or visitor says
   d. Place the needs of the client first
   e. Assist the client whenever possible to get the help they need
   f. Perform the job to a high standard of quality
   g. Open the door or hold the elevator for a client
   h. Approach each task with a positive attitude and remember that the housekeeping staff is there to serve the customer
   i. Follow through with commitments

4. "Good morning, Mrs. Smith. I'm just going to straighten your room and then I'll let you rest."

5. Allow the customers to go first onto the elevator; wait for the next one if there is no more room.

6. "You're on Floor 3, Wing B right now. Can I help you find where you need to go?"

7. "I will be up there right away. Thank you for telling me."

8. Housekeepers with a friendly, positive attitude will make a lasting impression about the facility. A clean facility reflects well on the staff and shows concern for the client's well-being.

Lesson 3: Communicating With Others - Activity Sheet

1. a. V
   b. N
   c. N
   d. V
   e. V
   f. N
   g. N
   h. V
   i. N

2. The verbal and nonverbal message must agree. If the messages do not agree, the receiver may not understand the message correctly.

3. a. Oral communication
   b. Telephone communication
   c. Fax machine
   d. Pagers or beepers
   e. Intercom or overhead page
   f. E-mail messages
   g. Written memos or notes

4. a. Match the verbal message with the nonverbal message
   b. Be aware of any blocks to communication such as language differences, hearing loss or deafness, blindness or visual impairment, or excessive environmental noise
   c. Listen actively
   d. Maintain eye contact

5. Answer should include five of the following
   a. When receiving a telephone call, answer by giving the name of the facility, unit within the facility, name, and title
   b. Speak clearly and do not talk too fast
   c. Use a pleasant tone of voice
   d. Do not make personal telephone calls
   e. Take notes when receiving detailed instructions about a job
   f. Make a message on an answering machine short and to the point but with all the necessary information

6. A written note serves as a reminder of the message.

7. Answer should include four of the following situations:
   a. The client is not breathing
   b. The client is gasping for breath or states, "I can't get my breath."
   c. The client's skin has a bluish color
   d. The client states a need to use the restroom immediately
   e. The client appears to be in pain and requests help

8. Answer should include four of the following examples:
   a. Wallpaper that is peeling away from the walls or is stained and dirty
   b. Loose floor tiles that could cause someone to catch a shoe heel and trip
   c. A sink that has a continuous drip
   d. Walls that need to be painted
   e. Lights that are not working

9. While cleaning the west wing of the fourth floor this morning, I noticed that the cord of the buffer is frayed. The buffer has been stored in the equipment storage area on the fourth floor.

Unit II: Interpersonal Relations - Written Unit Evaluation

1. b
2. b
3. a
4. d
5. b
6. d
7. a
8. c
9. a
10. d
11. b
12. a
13. a
14. b
15. b
16. a
17. b
18. b
19. a
20. a
21. b
22. c
23. d
24. b
25. a
26. b
27. a
28. a
29. b
30. a

Unit III: Infection Control and Safety

Lesson 1: Safe Work Environment - Activity Sheet

1. Answers should include the following:
   a. Place wet floor signs properly
   b. Use proper body mechanics
   c. Unplug equipment when not in use
   d. Use caution when oxygen is in use

2. Body mechanics means using the normal strengths of the body to prevent injury when moving and lifting objects.

3. Answer should include the following principles:
   a. Maintain a broad base of support.
   b. Use the longest, strongest muscles of the legs to lift.
   c. Bring the object close to the body when lifting or carrying an object.
   d. Keep the back in proper alignment.
   e. Use the weight of the body to help when pushing an object.
   f. Ask for help if the load is too heavy.

4. Occupational Safety and Health Act

5. a. The Exposure Control Plan
   b. The Hazard Communication Standard

6. The Bloodborne Pathogen Standard protects workers at risk for diseases that are spread through the blood and select body fluids.

7. Known as the "right-to-know" law, the Hazard Communication Standard issued by OSHA protects all workers by informing them about health hazards in the workplace and how to protect themselves from those hazards.

8. Material Safety Data Sheets

9. Answer must include the following information:
   a. Product identification
   b. Ingredients
   c. Physical data
   d. Fire and explosion hazard data
   e. Reactivity data
   f. Health hazard data
   g. Emergency and first aid procedures
   h. Special protection information
   i. Spill or leak procedures
   j. Storage and handling

10. The housekeeper may encounter radiology in a unit with a radiology department or operating room using a portable x-ray. To minimize exposure to radiation, a housekeeper should leave the room when an x-ray is being taken. Observe warning signs placed on doors where there is radiation.

11. Answers should include the following principles:
   a. Do not use electrical equipment around water.
   b. Cords should have three prong plugs to work effectively.
   c. Never use a power cord that is frayed.
   d. Grasp the plug to remove it from the socket, never pull the cord.
   e. Never overload too many electric plugs into wall outlets.

12. a. Place the ladder on a firm level surface.
   b. Never stand on the top step of a ladder.
   c. Place the ladder close to the object you are trying to reach.

Lesson 2: Working with Cleaning Chemicals - Activity Sheet

1. Answer should include five of the following chemicals:
   a. Window cleaner - Clean windows, mirrors, and other glass in the facility
   b. Toilet bowl cleaner - a mild acid to clean the toilet area
   c. Disinfectants - disinfect surfaces such as countertops, bedside tables, overbed tables, sinks, and hard floors
   d. All-purpose cleaners - use on a variety of surfaces when disinfecting is not necessary
   e. Wood cleaners and furniture polish - Clean and condition wood surfaces such as wood doors, hand railing, and furniture
   f. Carpet cleaners - clean soil from carpet surfaces
   g. Hand soap - clean and disinfect hands

2. The chemical must be used only on surfaces that have been listed on the label. Use on other types of surfaces could result in damage.

3. a. Measure one gallon of hot water
   b. Measure one ounce of concentrated All-Purpose Cleaner
   c. Add one ounce of All-Purpose Cleaner to the water solution

4. Locked - To prevent a passerby from taking them

5. The name of the chemical, its directions for use, cautions, and the hazard rating

6. Personal Protective Equipment

7. Personal Protective Equipment

Lesson 3: Infection Control - Activity Sheet

1. a. Virulent means extremely hard to kill.
   b. Infectious disease is the result of microorganisms that spread to other people.

2. The Category System of Isolation Precautions were used only after a patient had been diagnosed with an infectious disease. Universal Precautions applied to all persons that had been diagnosed with a disease spread by a bloodborne pathogen.

3. Body Substance Isolation focuses on the isolation of all moist and potentially infectious body substances from all patients, regardless of their infection status. Standard Precautions integrate the previous isolation precautions and includes guidelines designed to prevent the spread of pathogens by airborne or droplet transmission, or by contact with dry skin or contaminated surfaces.

4. a. A
   b. C, D
   c. B
   d. E

5. Gloves should be worn before touching any blood, body fluids, secretions, excretions, or contaminated items; before cleaning a spill of urine, blood, feces, or any other body substance; and when handling trash.

6. A gown should be worn to protect the skin and clothing where contamination by blood, body fluids, secretions, or excretions is possible.

7. A mask with a face shield should be worn to protect the mucous membranes eyes, nose, and mouth during procedures that can cause splashes or sprays of blood, body fluids, secretions, and excretions.

8. a. Stop Sign Alert
   b. It tells the housekeeper to check with the nursing staff to determine what type of isolation precautions should be used before entering the room to clean or empty trash.

9. a. Biohazard Symbol
   b. Any container that holds substances that are contaminated with blood or other potentially infectious materials.

Lesson 4: Preventing and Responding to Emergencies - Activity Sheet

1. a. Rescue - Rapidly move persons in immediate danger to an area of safety.
   b. Alarm - Activate the nearest fire alarm pull station.
   c. Confine - Prevent the spread of the fire and smoke by closing all doors and return with a fire extinguisher to the room where the fire was found.
   d. Extinguish - Use an appropriate fire extinguisher to put out the fire.

2. a. The housekeeper should know where the fire extinguishers and fire alarms are located in the area where he or she works.
   b. The housekeeper may be asked to move chairs into a hallway, escort ambulatory patients, and distribute blankets.
   c. A housekeeper might be asked to help assist in evacuating patients.

3. Name badges help clients easily identify people who care for them and also helps to identify anyone who is not supposed to be in the facility or near clients.

4. If a housekeeper notes a suspicious looking person in a health care facility, he or she should alert security immediately. If the facility does not have a security department, call 911 or the local emergency number.

5. Unlocked doors can serve as an entry way for strangers or allow confused clients to leave the facility unattended.

Unit III: Infection Control and Safety - Written Unit Evaluation

1. a
2. c
3. c
4. c
5. a
6. b
7. b
8. d
9. d
10. a
11. c
12. b
13. a
14. a
15. d
16. c
17. b
18. c
19. c
20. d
21. d
22. a
23. b
24. b
25. a
26. b
27. a
28. a
29. d
30. c
31. a
32. e
33. b

Unit IV: General Cleaning Procedures

Lesson 1: Housekeeping Equipment - Activity Sheet

1. b
2. e
3. a
4. g
5. f
6. d
7. c

8. Equipment that is working correctly lasts longer and does a better job of keeping the health care facility clean. Maintenance also prevents accidents that could harm employees and clients.

9. Equipment that has come into contact with blood or other body fluids needs to be disinfected before it can be used again.

Lesson 2: Routine Cleaning Tasks - Activity Sheet

1. Proper body mechanics will minimize fatigue and prevent injuries.

2. Frayed wires and malfunctioning equipment can pose a danger to both the housekeeper and clients of the health care facility.

Lesson 3: Floor Cleaning - Activity Sheet

1. a. Tiles
   b. Vinyl or linoleum
   c. Carpet

2. Answers should include five of the following safety precautions:
   a. Place wet floor signs at each end of the area being cleaned before beginning the procedure.
   b. Use proper body mechanics when mopping or using electrical cleaning, stripping, and buffing equipment.
   c. Complete one half of a hallway at a time, leaving the other half for people to walk on.
   d. Place the housekeeper's cart out of traffic areas to allow adequate room for people to walk.
   e. Make sure electrical equipment has no fraying ends or bare wires.
   f. Try to avoid running cords across high traffic areas.
   g. Use standard precautions when working with hazardous chemicals or when cleaning a blood or body fluid spill.

Unit IV: General Cleaning Procedures - Written Unit Evaluation

1. b
2. a
3. c
4. a
5. a
6. d
7. c
8. b
9. a
10. b
11. c
12. c
13. g
14. e
15. a
16. f
17. d
18. b
19. b
20. a
21. c

Unit V: Cleaning Areas Within a Facility

Lesson 1: Cleaning Client Rooms - Activity Sheet

1. Honesty and trustworthiness

2. Never

3. The items are brought to the facility to make the client feel more at home and bring back important memories for the client.

4. The client may have accidentally left a personal item in the bed that needs to be returned to them.

5. A client who is discharged will not be returning to that particular room.

6. Isolation means that special precautions are used to prevent the spread of a particular microorganisms.

7. Answer should include five of the following:
   a. Read the sign posted outside the client's door and use personal protective equipment that is indicated.
   b. Use caution with contaminated trash.
   c. Throw away any gloves, gowns, or masks after cleaning the room and dispose of them in the proper waste receptacle immediately after leaving the room.
   d. Remove cubicle and window curtains for cleaning.
   e. Bag all cleaning cloths, wet mop heads, and dust mop heads used in the room that are soiled. DO NOT use them to clean other areas.
   f. Dispose of water in the mop bucket and thoroughly rinse it out and fill it with clean water and germicide before cleaning the next area.
   g. Decontaminate any equipment (mop handles, buckets, plastic bottles, etc.) that is not clean with the appropriate item according to facility policy.

Lesson 2: Cleaning Areas Within a Facility Other than Client Rooms - Activity Sheet

1. Answer should include five of the following:
   a. Public restrooms
   b. Soiled and clean utility rooms
   c. Report room
   d. Break room
   e. Nurses station
   f. Lobby
   g. Dining room
   h. Offices and conference rooms
   i. Shower or tub room

2. All common areas should be cleaned during the times when the least amount of people will be using them. The times to clean these areas will become more apparent to the housekeeper after he or she has worked there for a time.

Unit V: Cleaning Areas Within a Facility - Written Unit Evaluation

1. b
2. c
3. c
4. a
5. b
6. a
7. d

Unit VI: Laundry

Lesson 1: Safety - Activity Sheet

1. a. The chemicals are more concentrated than the ones found at home.
   b. A chemical used to clean dirt from clothes.
   c. A chemical used to make clothes feel soft.
   d. A chemical attraction of a piece of clothing to the person wearing it.
   e. A chemical that returns the normal pH to the clothes.
   f. A hypochloride solution that helps remove stains from white clothing.
   g. A stain remover used before detergent and bleach.

2. a. Push
   b. Knees, back
   c. Ask for help
   d. Twist

3. a. Worker can become overheated
   b. Sharp objects might be left in linens
   c. Equipment may become very hot
   d. Machines could jamb

Lesson 2: Laundry Procedures - Activity Sheet

1. a. Separating clothes into groups that have similar colors and similar types of fabric.
   b. Color is released from the fabric into the water and the color is then picked up by the other clothes causing them to change colors.
   c. A substance that has caused a color change in fabric of clothing or linens.
   d. A location that is hidden to determine how a fabric will respond to a cleaning agent.
   e. Small particles of the fabric that have come loose during the washing and drying process.

2. a. Personal protective equipment is not necessary because the laundry has been cleansed of harmful body fluids.
   b. Gloves should be worn to protect the housekeeper's hands from microorganisms found on the laundry.
   c. Personal protective equipment is not necessary because the laundry has been cleaned.
   d. Gloves should be worn to protect the laundry workers hands from touching harmful blood or body fluids.
   e. Gloves should be worn to protect the laundry workers hands from touching harmful blood or body fluids.
   f. Gloves should be worn to protect the laundry workers hands from touching harmful blood or body fluids.
   g. Gloves and gown should be worn to protect the laundry workers hands and clothing from touching harmful microorganisms.

Lesson 3: Distributing Laundry Items and Cleanup - Activity Sheet

1. Linen carts are filled in the laundry room with clean linens and then pushed to the unit where it is needed. The linen cart with soiled laundry from that unit is taken to the laundry room to be restocked.

2. Linens must be placed on a cart and taken to the linen closet where the items are placed in the closet for use by the staff.

3. Clean laundry must avoid contamination with microorganisms as the linen cart is pushed through the facility.

4. The linen carts and surfaces will be sprayed and washed daily with disinfectant. Any obvious soiling should be cleaned immediately with disinfectant solution.

Unit VI: Laundry - Written Unit Evaluations

1. c
2. a
3. d
4. c
5. b
6. b
7. a
8. d
9. c
10. a
11. d
12. a
13. e
14. c
15. b
16. f